## CDL (Community Data Link) Order Form

Date:				
Ordered By				
Organization:				
Address:				
City/State:				
Zip/Postal Code:				
Phone:				
Fax:				
Contact Name:				



Healthcare Business Education, Inc. 680 Hillcrest Dr. NW Salem, OR United States 97304 Phone: (503) 510-5685 Fax: (503) 214-8686 www.oregonresources.com

Deliver To	Same as Above
Organization:	
Address:	
City/State:	
Zip/Postal Code:	
Phone:	
Fax:	
Contact Name:	

ltem	Description	Quantity	Unit Price	Amount
CDL	CDL Single Database (One time only fee)			
CDL	CDL Single Database Each Addt. Station (One time only fee)			
CDL	CDL Multi-User Server Database (One time only fee)			
CDL	CDL Multi-User Additional Stations (One time only fee)			
CDL	CDL Monthly Support Fee (Per Station - Per Month)			
CDL	Citrix Monthly Connectivity Fee (Per Station - Per Month)			
			Sub-total	

## Payment

- Check payable to Healthcare Business Education, Inc.
- Credit Card
  - American Express
  - Mastercard
  - 🔿 Visa

Card Number: Expiration Date: Cardholder Name:

## **Internal Use Only**

**Grand Total** 

Order Completed:	
Ship Date:	