



CombiCarrier II[®]

Scoop Stretcher & Extrication Board

Custom Lettering

Thermally fused custom lettering is bonded to the surface providing long term durability

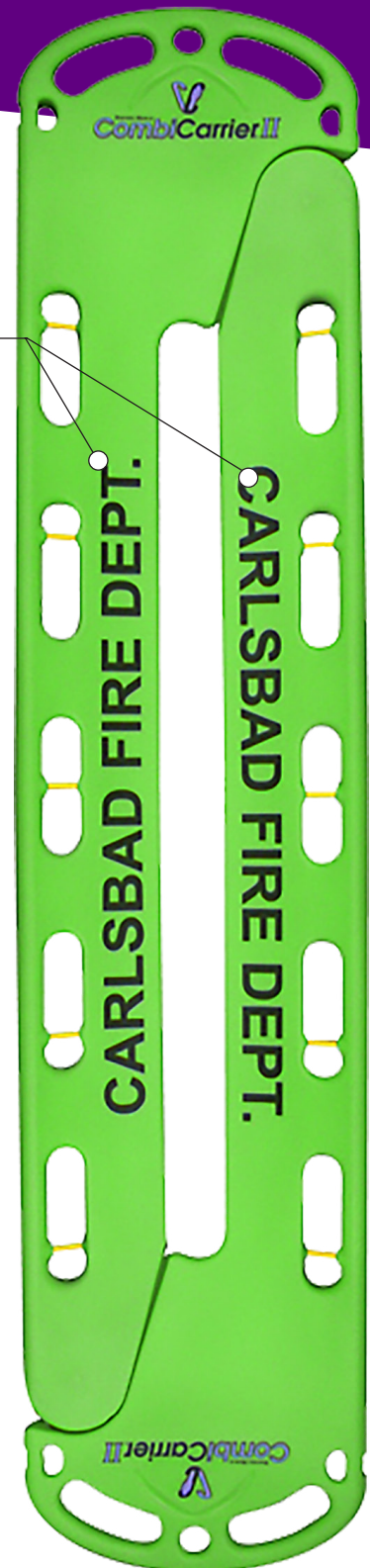
This exclusive service is only available for the industry leading CombiCarrier II[®] and is performed in-house at the Hartwell Medical manufacturing facilities. This is an affordable customization option allowing department identification on the product. Give your customers something to be proud of in addition to assisting in keeping tabs on products in the field.

Easy Ordering:

- 1) Place your order for new CombiCarrier II units and note custom lettering requested on the purchase order.
- 2) Fill out the custom lettering form and email it to: CustomerService@HartwellMedical.com
- 3) We will match-up the incoming CombiCarrier II order with the custom lettering request and send the lettering artwork proof to you for your customer's approval.
- 4) Once we have the signed artwork proof approval, production will be initiated. Production time is based on quantity ordered.

Contact your local authorized dealer or visit us online at www.HartwellMedical.com

For detailed product information, training and education materials please visit our website





CombiCarrier II®

AVAILABLE CHARACTERS

ABCDEFGHIJKLM
NOPQRSTUVWXYZ
1234567890 . - #

24 Total letters including spaces

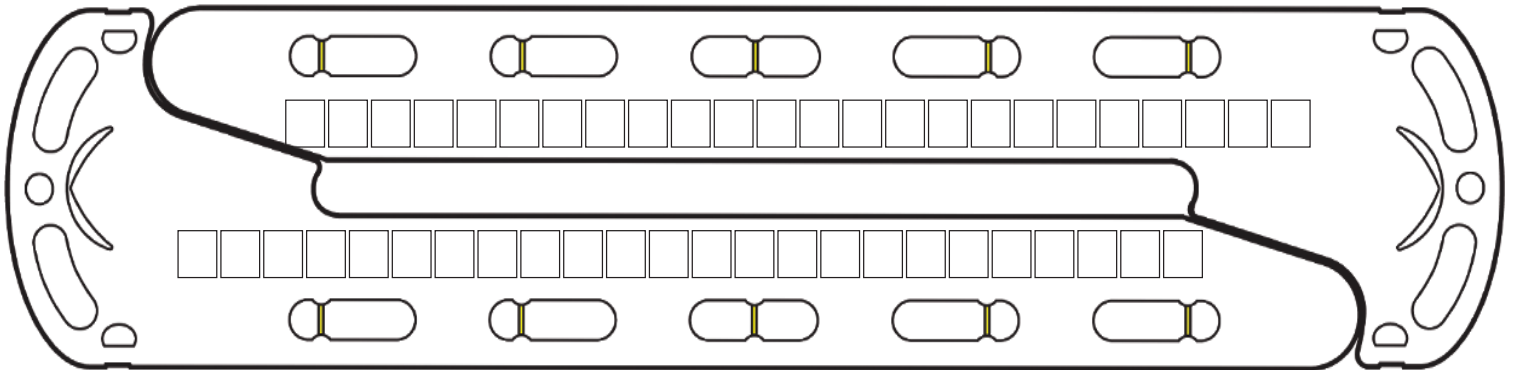
CUSTOM LETTERING ORDER FORM

How To Order

- 1) Fill in the boxes on the diagram using the "Available Characters." Custom Lettering will be centered on the CombiCarrierII.
- 2) All CombiCarrierII® units ordered will have the same custom lettering on each product. Lettering color is black. Please contact us directly if additional customization is desired.
- 3) Specify the quantity of CombiCarrierII devices. Fill out and sign the form and send back to: CustomerService@HartwellMedical.com. You must include your purchase order with this form.
- 4) Delivery time will vary depending on quantity ordered.

Please Note: Custom Lettering is Non-Refundable

A proof of your customer's custom lettering will be provided and must be signed off and returned to Hartwell Medical prior to production.



Please print block letters in the squares above. Leave a blank space between words.



SHIP TO: **CombiCarrierII Quantity Ordered:** _____

Customer Name: _____

Shipping Address: _____

City: _____

State: _____ Zip Code: _____

Order Placed By: _____

Title: _____

Signature: _____

Phone: () _____

Email Form To: CustomerCare@life-assist.com