



Work Order

support@epayhealthcare.com
888-640-7815

Date: _____

Customer ID: _____

Bill to: _____

Ship to: _____

Qty	Description	Unit Price	Line Total
	EMV Credit Card Swiper		
	Please Select		
	either the Rental or Purchase Option		
	<i>Monthly Rental</i>		
	Per device monthly unit rental fee	\$ 16.00	
	OR		
	<i>Purchase</i>		
	Device	\$ 161.00	
	Powered USB Cable	\$ 22.00	
	VMAC and SPI 8.13+ file load	\$ 20.00	
	Uniterm License (1st year)	\$ 99.00	
	<i>Shipping</i>		
	Total	\$	-

Return to: support@epayhealthcare.com

Authorized by: _____

Date: _____