

VENDOR PURCHASE ORDER FORM

FROM:

Diagnostic Imaging Systems, Inc.
2325 East Saint Charles Street
Rapid City, SD 57703
1-800-346-9729
Fax: 605-341-0053

BILL TO:

Diagnostic Imaging Systems, Inc.
P.O. Box 3390
Rapid City, SD 57709

Date 3/ 6/18

P.O.# 5663

Vendor Name & address:

RADMEDIX
10148 INTERNATIONAL BLVD
WEST CHESTER, OHIO
45246

DIS, Ordered By: TW

Phone number: 844-723-6334

Fax Number: 513-278-0150

Account Number:

Ship To Address:

Diagnostic Imaging Systems, Inc.
2325 East St. Charles
Rapid City, SD 57703

<u>QTY</u>	<u>Item #</u>	<u>Description</u>	<u>Price</u>
1		10x12 Wireless CSI with SW	\$20,000.00
1		Panel Protective Case with Handle	
1		Laptop Computer 1TB Hard Drive set up with software for panel	
1		5 Year Hardware Warranty	
1		5 Year Software Support	
1		Cloud setup	

For customer:

Mountaineer Animal Clinic
Paul Zancanella, DVM
1801 Yellowstone Road
Rock Springs, WY 82901

Freight CHARGES _____

Requested SHIP DATE _____

Shipping Method Requested

FEDX _____ UPS _____ GROUND _____ 2ND DAY _____ NEXT DAY _____ MOTOR FREIGHT _____

Actual Ship Date:

Shipped Via:

Received Into Shipping By: _____

Date: _____

Accepted into Book Keeping By: _____

Date: _____