

**FORM** 

# ULM/FORM/001.01

## Effective Date 25/Apr/2018 UNLICENSED MEDICINES ORDER FORM For Patients in the UK

Version: 002

#### Fax the completed form to 020 8238 6786 or email it to orders@aliummedical.com Call us on 020 8238 6770 or login into our website at www.aliummedical.com We guarantee next day delivery on stock lines for all confirmed orders received by 5pm

### **Customer Details**

Name of Organisation	
Delivery Address	
Postcode	

Contact name	
Telephone Number	
Account No./Branch No.	
Email Address/Fax Number	

### **Complete Product Details**

Strength	Pack size	Quantity (number of original packs required)
	Strength	Strength Pack size

**Customer Order Number** 

Please ensure that all details are correct as the products ordered are not eligible for return. Order Confirmation- to be completed by customer. Please ensure this section is completed or we will be unable to process your order.

This order is unsolicited and is to fulfil the special needs of individual patients.

Order placed by:						
Name:		Signature:	Date:			
Comments:						

#### **Our contact Information**

Alium Medical Limited, 6 Delta Court, Manor Way, Borehamwood, WD6 1FJ

 

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 enquiries@aliummedical.com / www.aliummedical.com

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