

Julie Weir Dental Practice Management

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PRODUCT ORDER FORM

| Quantity | Product | Unit Price | Total |
|-----------------------|--|------------|-------|
| PRACTICE HELPS | | | |
| | Team Meeting Kit | \$85 | |
| | Top 10 Front Desk Verbal Skills Reference | \$85 | |
| | Benefits of Procedures Flash Cards - Pediatric | \$65 | |
| | Benefits of Procedures Flash Cards - General | \$65 | |
| | Benefits of Procedures Flash Cards - Periodontal | \$65 | |
| | Developing Doctor Vision & Mission Statements | \$40 | |
| | <i>Powerful Practice Volume 1 Book</i> | \$25 | |

| PRACTICE MANAGEMENT TOOLS | | | |
|----------------------------------|--|------|--|
| | Financial Forms Packet | \$85 | |
| | Bonus System and Rewards | \$85 | |
| | Employee Total Compensation Calculator | \$85 | |
| | Office & Dental Supply Budget Monitor | \$85 | |
| | Yearly Marketing Plan System | \$85 | |
| | Performance Review System (OM, FD, ASST & HYG) | \$85 | |

| PRACTICE FOUNDATIONS | | | |
|-----------------------------|---|----------------------|--|
| | <i>10 Steps to a Dental Practice Business Plan Book</i> | \$295 | |
| | Practice Vital Signs & Goal Monitoring System (Standard 3-Producer System) | \$495 | |
| | Special Offer: Book + Std. Monitoring System | \$650 | |
| | Practice Vital Signs & Goal Monitoring System (Customized Version: 4 or more Producers) | Call for Price Quote | |
| | Hiring & Training Disk & Manual | \$150 | |
| | Practice Management Forms Disk & Manual | \$295 | |
| | | Subtotal | |
| | Shipping & Handling: \$6 First Item, \$2 Each Additional Item | | |
| | | Total | |

| Shipping Information | | Billing Information | |
|-----------------------------|--|----------------------------|--|
| Name | | | |
| Street Address | | | |
| City, State, Zip | | | |
| Email | | Phone | |

| Payment Information | |
|---|-----------------------------|
| Check (Please make payable to Julie Weir Dental Practice Management) OR | |
| Credit Card: _____ Mastercard _____ Visa | |
| Card #: _____ | Expiration Date ____ / ____ |
| Cardholder Signature: _____ Security Code _____ | |

**THANK YOU
FOR YOUR
ORDER!**