

## Order Confirmation

**Date of Order:** July 20, 2021

**School Name:** MCPHS - Boston - Nursing (Immunizations)

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**Personal Information:**

Name: Letha Alayne Rodriguez  
Order Number: 9021-0720-1832-1100  
Name on Credit Card: Rafael Rodriguez  
Credit Card Number: \*\*\*\* \* 1018  
Expiration Date: 11/2023

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**Package - MJ76 : 25.00**

Medical Document Manager CRR  
Medical Document Manager CRR

**Total Price: \$25.00**

**Additional Information:**

This package includes document storage. At the end of the order process, you will be prompted to upload specific documents required by your school for immunization, medical or certification records.

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For assistance, use the Need Help? menu within your account.