



**RECOVERYRX HOSPITAL & PHYSICIAN OFFICE EVALUATION REQUEST**  
**and NEW ACCOUNT SETUP FORM**

<b>Date of Request:</b>	<b>*Tax Status:</b> <input type="checkbox"/> Taxable <input type="checkbox"/> Non-Taxable	<b>TAX STATUS:</b> <i>If non-taxable, send a copy of Tax Exempt Certificate (Tax will be assessed unless a tax certificate is submitted with application)</i>
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<b>SALES REPRESENTATIVE</b>  <b>Name:</b> Ryan Williams <b>Phone:</b> 805-588-0158 <b>Email:</b> Rwilliams@yellowjacketmedical.com	<b>HOSPITAL or PHYSICIAN OFFICE NAME:</b>  <b>STATE LICENSE NO:</b>  <b>STATE:</b>
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<b>Bill TO ADDRESS:</b>	<b>SHIP TO ADDRESS:</b>
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<b>Purchase Order:</b>  <b>Special Instructions:</b>	<b>Attention:</b>  <b>Contact Phone:</b>  <b>Contact email:</b>
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Quantity	Item code	Description
3	TBD	TBD <i>Maximum Order for evaluation: 3 UNITS</i>

**Terms and Conditions**

BioElectronics distributes RECOVERYRX®, an FDA cleared medical device indicated to reduce postoperative pain. BioElectronics agrees to provide the hospital or physician office with the above-referenced number of RECOVERYRX® to facilitate the evaluation of the product upon the following terms and conditions:

- \* BioElectronics shall provide RECOVERYRX® units free of charge;
- \* RECOVERY RX® shall be delivered to Hospital or physician office FOB Destination;
- \* Hospital or physician agrees that the RECOVERYRX® units shall be used solely for patient care and/or physician training and shall not be sold;
- \* Hospital or physician agrees not to bill, or seek reimbursement from, any patient or payer (Medicare, Medicaid, commercial insurance, etc.) for the RECOVERYRX® units;
- \* BioElectronics is providing the RECOVERYRX® to be used as directed in the product labeling;
- \* Hospital or physician agrees that any transfer of the RECOVERYRX® units shall be subject to the terms and conditions herein;
- \* BioElectronics and Hospital or physician agree that the amount of RECOVERYRX® units provided hereunder does not exceed the amount reasonably necessary for the adequate evaluation of the product.

RECOVERYRX® units are provided for evaluation on an “as-is” basis. BioElectronics makes no other warranties, express or implied. BioElectronics shall not be liable for any special, incidental or consequential damages, including, but not limited to, loss of profits or other economic loss.



I am authorized to request and receive medical device evaluation product on behalf of the hospital listed above and subject to these terms and conditions herein. I would like evaluation product shipped to the address listed above. I acknowledge that the evaluation product cannot be sold, traded, bartered, or returned for credit.

Signature:

Name:

Title:

Date:

Submit completed form to:

Email: [ryan@sandlotmedical.com](mailto:ryan@sandlotmedical.com)

Fax: 1-888-518-9288



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