

**Date of Document:** 14/1/2026  
**Clinic Name:** Australian Health Professionals  
**Clinic Address:** C/O 604/31 Crown St, Wollongong NSW 2500  
**Clinic Phone:** 0420 241 900  
**Clinic Contact:** Vivian

**Sterile instrument order:**

Item	Quantity	Sterilisation Date	Tracking number	Expiry Date
Clipper + File	21	14/1/2026	260114-4	13/1/2027

**Total items:** 21      **Batch**      **Sets**  
**Clean boxes Supplied:** 1      260114-4      21  
**Dirty Boxes supplied:** 1

Sterile compliant on autoclave  
 Sterile compliant on pack  
 Sterile compliant on class 6 emulating indicator  
 Sterile compliant on indicator label

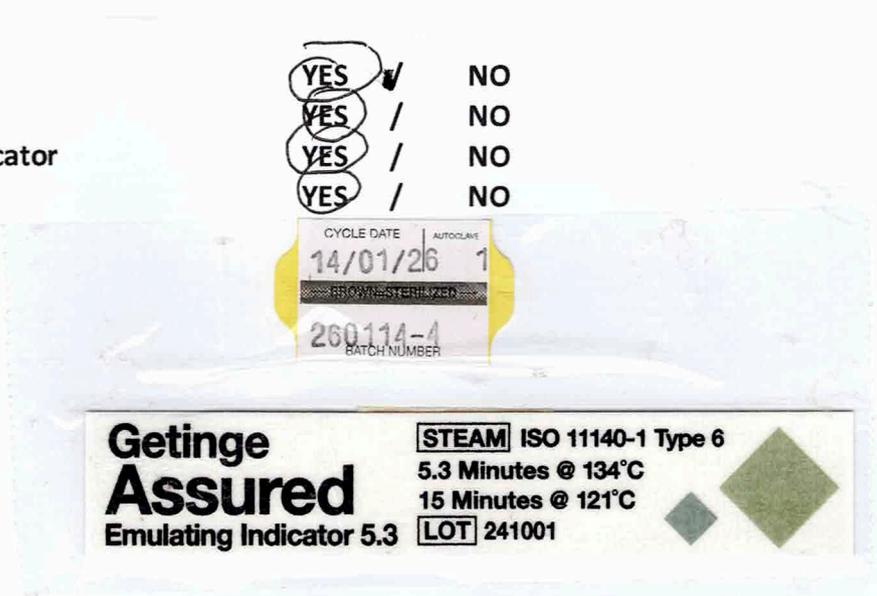
YES ✓ / NO  
 YES / NO  
 YES / NO  
 YES / NO

**Certified By:** Chris H

**Signed:**



**Notes:**



Sterilised By PodMed Supplies  
 STERILISATION DATE: 14/01/2026  
 BATCH NUMBER: 260114-4  
 EXPIRATION DATE: 13/01/2027  
 STERILE   
 DO NOT USE IF PACK IS DAMAGED

