

SUPPLY ORDER FORM

Please allow 48 hr for all orders to be filled

Date of Request: _____

Requesting Office: _____

Person Ordering: _____



	Qty	# Ordered	# Filled
PRW Requisition Forms.....	100/pack	<input type="text"/>	<input type="text"/>
ModMed/EMA paper with labels (pack).....	100 /pack	<input type="text"/>	<input type="text"/>
ModMed/EMA paper with labels (case).....	1000/case	<input type="text"/>	<input type="text"/>
Specimen Bags.....	100/pack	<input type="text"/>	<input type="text"/>
Labels for bottles.....	30/sheet	<input type="text"/>	<input type="text"/>
Specimen Bottles:			
20ml (sm) Formalin Jars.....	96/case	<input type="text"/>	<input type="text"/>
40ml (lg) Formalin Jars.....	96/case	<input type="text"/>	<input type="text"/>
60ml (xlg) Formalin Jars.....	24/box	<input type="text"/>	<input type="text"/>
120ml (2xl) Formalin Jars.....	24/box	<input type="text"/>	<input type="text"/>
Prostate Kits:			
6 core.....	1/kit	<input type="text"/>	<input type="text"/>
12 core.....	1/kit	<input type="text"/>	<input type="text"/>
Michel's Fixative vials (immunofluorescence testing)....	1 ea.	<input type="text"/>	<input type="text"/>
Culture Swabs.....	10/pack	<input type="text"/>	<input type="text"/>
DTM vials (Dermatophyte Test Medium).....	20/box	<input type="text"/>	<input type="text"/>
Laboratory Info Leaflets (for patients).....	100/pack	<input type="text"/>	<input type="text"/>
Specimen Log Forms.....	25/case	<input type="text"/>	<input type="text"/>
Printer/Copy Paper.....	1 case	<input type="text"/>	<input type="text"/>

Printer Ink: Cartridge #: _____ Type: Cyan Magenta Yellow Black

Additional Comments or Requests: