

# **BVD Nasal Swab Kit Order Form**

## **ADDRESS**

DATE

# **CONTACT INFO**

WVDL Supply Department 445 Easterday Lane Madison, WI 53706 Phone: (608) 262-4532 or Toll free: (800) 608-8387 Fax: (608) 416-1539 E-mail: Supply.room@wvdl.wisc.edu

#### www.wvdl.wisc.edu

## **PLEASE PRINT**

NAME OF CLINIC EMAIL				
VETERINARIAN TELEPHONE				
SHIPPING ADDRESS	( <u>NO P.O. BOX NUMBERS</u> )	CITY & STATE		ZIP CODE
QUANTITY			UNIT PRICE	TOTAL
	96 Deep Well Plate (includes bag)			
	Box of 6" Polyester Tipped Swabs (200)			
	Aluminum Plate Sealing Tape			
	Ice Pack			
	UPS Return Shipping Label - Ground			
	UPS Return Shipping Label - Next Day			
	Sub-Total			
	Shipping Charges: In-state - \$15.00 / Out-of-state - \$30.00			

Note: Prices are subject to change.

Lab Use Only

FM-CL-ORD-5

Filled by:

Date: \_