

EQIAS LABS SUPPLY ORDER FORM

Company Name: _____

Contact Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone: _____

Email: _____

Date Needed: _____

Please indicate below the sample type(s) and quantity of individual samples you will be testing at your event. Supplies will be shipped to the address listed above.

Check	Sample Type	# of Samples	Price/Sample	Total
<input type="checkbox"/>	Equine Blood Only		\$5.50	
<input type="checkbox"/>	Equine Blood Only (<i>Sales Clients</i>)		\$3.00	
<input type="checkbox"/>	Equine Blood and Urine		\$8.00	
<input type="checkbox"/>	Equine Urine Only		\$3.50	
<input type="checkbox"/>	Livestock Blood Only		\$5.50	
<input type="checkbox"/>	Livestock Blood and Urine		\$8.00	
<input type="checkbox"/>	Livestock Urine Only		\$3.50	
<input type="checkbox"/>	Other:		TBD	
			Total:	

Shipping and Processing			
Fee	# of Coolers	Price/Cooler	Total
Outgoing Shipping (Ground)		\$10.00	
Return Shipping (Overnight)		\$80.00	
Processing Fee		\$8.00	
			Total

Comments: _____

Note: Cooler space is limited to 20 blood and urine samples each. More than one cooler may be required depending on testing volume. Shipping and Processing fees are subject to change at the Laboratory's discretion.

****PLEASE EMAIL COMPLETED FORM TO info@eqiaslabs.com****

For Lab Use Only	
Date Request Received:	_____
Prepared By:	_____
Date Shipped:	_____
Tracking Number:	_____



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