

**COMPARATIVE PATHOLOGY LABORATORY
UNIVERSITY OF MIAMI MILLER SCHOOL OF MEDICINE
SUPPLY REQUEST FORM**

Supplies will be sent via US Mail within 3 days of receiving this form. Amount of supplies sent are dependent on the number of samples sent to our lab on a monthly basis.

If you have any questions, please contact us. Please fax this form to (305)243-5662.

Name of Clinic: _____

Account Number: _____

Person Completing This Form: _____

Date: _____

Supply Item	Amount Requested
Small Capijet Green Top Tubes (lithium heparin)	
Small Capijet Lavendar Top Tubes (EDTA)	
Slide holders (flat)	
Slide holders (box-like)	
Small microfuge tubes for sample aliquot and transport	
Avian Lab Request Forms	
FedEx forms	
Manual of Services	
Other	