



orders@vetlab.com  
www.vetlab.com

## SPECTRUM-MS (MASTITIS) ORDER FORM

Vetlab Supply

18131 SW 98 Court  
Palmetto Bay FL 33157-5509  
305-253-1848

Person Completing Profile				Date	
Hospital/Practice/Facility Name				Email	
Owner Name		Phone		FAX	
Shipping Address		City	State	ZIP	
Billing Address (If different)		City	State	Zip	WEB site
Contact Name			Lab Technician		

Is your business Tax Exempt?(Please include Tax exempt Certificate)				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Practice Type (Please check all that apply)		<input type="checkbox"/> Small Animal	<input type="checkbox"/> Avian/Exotic	<input type="checkbox"/> Emergency	<input type="checkbox"/> Equine
<input type="checkbox"/> Aquarium/Zoo	<input type="checkbox"/> Large Animal	<input type="checkbox"/> Mixed	<input type="checkbox"/> Education	<input type="checkbox"/> Research/Lab	<input type="checkbox"/> Physician
<input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Specialty (Specify) _____				

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
	MCR-PLTSP400	Spectrum-MS (Mastitis) Agar; indiv wrapped; pkg/10	78.21	
	MCR-PLTSPMSCHART	Spectrum-MS (Mastitis) Interpretation color chart (free with 1st order)	9.25	
	EQP-INQCY10140	Incubator; Compact; 0.7 cu ft	599.00	
	MCR-EQGLB2850	Sterile inoculating loops; indiv wrapped; pkg/100	40.04	
	URN-CONTST5912	Sterile specimen container; indiv wrapped; case/100	59.46	
<b>***Prices are subject to change***</b>				
<b>Shipping charges are added to all orders</b>				
			<b>Total</b>	

Please check <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> AMEX			
Card Number		Expiration Date	CIN (3 digits on reverse)
Name as it appears on card			
Card <i>BILLING</i> address		City	State
Signature of card holder		Date	

**Terms and Conditions**

Vetlab Supply has a minimum order requirement of \$25.00 before taxes and/or shipping charges on all credit/debit card purchases.

**RETURNS \*\*\*Special order items may not be returned\*\*\***

Returns must be authorized & have a Return Materials Authorization (RMA) number. **Unauthorized returns will be refused. Items must be received in undamaged, sellable condition.** Upon receipt of items credit will be posted to customer account & applied to future orders. Returns are subject to 20% restocking fee; customer is responsible for all shipping charges.

**\*\*Return completed form by fax 305-232-8421 or email orders@vetlab.com \*\*\***