

## NEW ACCOUNT PROFILE and

## UV LIGHT PEN ORDER FORM

## Vetlab Supply

18131 SW 98 Court
Palmetto Bay FL 33157-5509
800-330-1522 • 305-253-1848

Person Completing Profile						Date	
Hospital/Practice/Facility Name						Email	
Owner Name				Phone		FAX	
Shipping A	Address	City	Į	State	ZIP		
Billing Add	dress (If different)	City	State	Zip	WEB site		
Contact Name				Lab Technician			
Is your business Tax Exempt?(Please include Tax exempt Certificate)						□ Yes	□ No
Practice 1	Type (Please check all that a	apply)	ply) 🗆 🗅 Small Animal 🗀		xotic	□ Emergency	□ Equine
□ Aquariun	_	□ Mixed □ Education □ Research/Lab □ Specialty (Specify)			□ Physician	□ Distributor	
QTY ITEM NUMBER			DESCRIPTION			UNIT PRICE	EXTENDED PRICE
	EQP-SP330005 UV Light Pen					24.00	
	EQP-SP330005BT UV Light Pen Batttery; pkg/4					8.58	
	EQP-SP330005IR UV Light Pen black ink refill					4.30	
	***Prices are subject to change*** Shipping charges are added to all orders						
						Total	
Please check   MasterCard  VISA   AMEX							
Card Number Expiration Date CIN (3 digi						everse)	
Name as	it appears on card	•		· ·			
Card <i>BILLING</i> address			City		State	ZIP	
Signature of card holder						Date	
RETURNS: All returns m Upon receip Customer re	oly has a minimum order requirement of of item, credit will be posted to content of the content	ent of \$25.00 before n Materials Authoriz ustomer account &	zation (RMA) number. applied to future orde	g charges or  Unauthoriz rs.	zed returns will l		

\*\*Return completed form by fax 305-232-842 1 or email orders@vetlab.com \*\*\*