NBS KITS BIRTHING FACILITY ORDER FORM

To: Office of Laboratory Services
167 11th Avenue
South Charleston, WV 25303

Phone: 304-558-3530 EXT 2204
Fax: 304-558-2006

Date of Order: _____

Please order the number you expect to use in a 90 day period.

Specimen Collection Cards _____

UPS Cardboard Envelope and Label Pouch _____

State Lab Use Only Card #	

_____
Person and/or Department to whom kits should be sent

_____
Name of Hospital

_____
Street and Number

_____
Town and Zip Code

_____
Telephone

_____
Person Ordering