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NEW ACCOUNT PROFILE

and

DERMATOPLATE 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 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) Yes No

Practice Type (Please check all that apply) Small Animal Avian/Exotic Emergency Equine

Aquarium/Zoo Large Animal Mixed Education Research/Lab Physician Distributor

Other (Specify) _____ Specialty (Specify) _____

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
	MCR-CUL7950-10	Dermatoplate-Duo DTM/ESA Plate; pkg/10	39.32	
	MCR-CUL7950-25	Dermatoplate-Duo DTM/ESA Plate; pkg/25	81.48	
	MCR-CUL7950S-10	Dermatoplate S-Duo DTM/Sabaroud Plate; pkg/10	39.32	
	MCR-CUL7950S-25	Dermatoplate S-Duo DTM/Sabaroud Plate; pkg/25	81.48	
	MCR-CULST738682-1	Dermatoplate Fungal Stain(<i>Lactophenol Cotton Blue</i>);1oz.	23.41	
	MCR-CULCR3330-1	Dermatoplate Clearing Solution; (<i>KOH 10% w/DMSO</i>);1oz.	18.28	
	MCR-SDL745	Fungi Tape; roll/300 coverslips	46.21	
	MCR-DTM/ESM Kit	Dermatoplate Kit;10 Duo plates, stain,KOH, Fungi tape	126.00	
	MCR-CUL79CHART	8.5X14 Color laminated Dermatophyte interpretation guide	9.45	
	MCR-CULM10249007	Toothbrush for Performing Mackenzie Dermatophyte Method; Individually wrapped; 24/box	7.00	
	EQP-SP330005	UV Light Pen	24.00	
Prices are subject to change. Shipping charges are added to all orders			Total	

Please check MasterCard VISA AMEX

Card Number _____ Expiration Date _____ CIN (3 digits on reverse) _____

Name as it appears on card _____

Card *BILLING* address _____ City _____ State _____ ZIP _____

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:
All returns must be authorized & have a Return Materials Authorization (RMA) number. **Unauthorized returns will be refused.**
Upon receipt of item, credit will be posted to customer account & applied to future orders.
Customer requested returns are subject to 20% restocking fee and customer is responsible for all shipping charges.
Special order items may not be returned.

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