

# FAX



URGENT \_\_\_ CONFIDENTIAL \_\_\_

Public Health Services – Reproductive Supplies

TO/DESTINATAIRE :

CC :

FROM/EXPÉDITEUR :

FAX # :

DATE :

PAGE(s) :

SUBJECT/OBJET : Reproductive Supplies Stock Request

Dr./NP/PA Name : \_\_\_\_\_

Office Phone Number : \_\_\_\_\_

Office Location : \_\_\_\_\_

Courier Delivery Site : \_\_\_\_\_  
(if different from office location)

<b>Drug Name:</b>	<b>Total Quantity Requested:</b>	<b>Lot Number: (Pharmacy Use Only)</b>	<b>Expiry Date: (Pharmacy Use Only)</b>
Alysen 28 Starter Pack			
Mirvala 28 Starter Pack			
Tricira Lo 28 Starter Pack			
Backup Plan Onestep			