



SUPPLY ORDER FORM

At CombiMatrix Diagnostics, our transport kits and requisitions are designed to meet your facility's unique testing needs. Please use this form to quickly place your supply order(s). Simply review this form, indicate the items needed, and fax this form to Client Services to place your order.

If you need something that is not listed on this form, please contact Client Services and they will be happy to assist you.

Phone: 800-710-0624, ext. 450 Fax: 949-753-4725 Email: clientservices@cmdiagnostics.com

Step 1: Select Transport Kits Required
 Transport Kit (All kits include FedEx Clinical Pak, FedEx airbill and biohazard bag)

<input type="checkbox"/> Constitutional	Quantity: _____
<input type="checkbox"/> Prenatal	Quantity: _____
<input type="checkbox"/> Product of Conception (POC)	Quantity: _____
<input type="checkbox"/> Oncology	Quantity: _____

Step 2: Select Type of Requisitions Required

<input type="checkbox"/> Constitutional / Prenatal / POC	Quantity: _____
<input type="checkbox"/> Oncology	Quantity: _____

Step 3: Select Other Supplies Required
 Product Literature:

- Complete Literature Packet (Includes all CMDX tests plus Disorder Lists)
- Constitutional
- Prenatal
- Prenatal Tri-fold Brochures (includes display stand) Language: English _____ Spanish _____
- Oncology

Other Supplies (please indicate): _____

Step 4: Client Information *(Preprinted on requisitions as applicable)*

Contact name: _____ Phone #: _____

Contact email: _____

Facility name: _____

Mailing address: _____

City, State, Zip: _____

Physician & NPI# (if desired): _____

Physician Phone & Fax #: _____

Sendout Lab Phone & Fax #: _____

Step 5: Please FAX this completed form back to Client Services @ (949) 753-4725

