

Email this form to [order@vmrd.com](mailto:order@vmrd.com)

## Order Information

Date \_\_\_\_\_

Customer ID No. \_\_\_\_\_

Requestor/Buyer Name \_\_\_\_\_

## Shipping Address

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Courier (FedEx, UPS, DHL) Collect Account # \_\_\_\_\_

## Billing Address

Same as Shipping Address

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

## Product Information **(ALL FIELDS MUST BE COMPLETED)**

Item Requested \_\_\_\_\_

Volume/Size Requested \_\_\_\_\_ Specific Bottle Size/Quantity \_\_\_\_\_

Intended Use \_\_\_\_\_

### Preservation Options:

None  
 0.09% Azide  
 Other: \_\_\_\_\_

10 PPM PROCLIN 300  
 Unpreserved by Dialysis

### Filtration Options:

0.22 µM Filtered  
 Not Filtered  
 Other: \_\_\_\_\_

### Additional Requirements:

## FOR INTERNAL USE

### Production Details

Salesperson \_\_\_\_\_

Product Name Appearing on Label \_\_\_\_\_

NS ID to be Created \_\_\_\_\_ Finished Goods NS ID \_\_\_\_\_

### Storage Temperature

2-7°C (SHIP AT AMBIENT TEMP)  <-10°C (SHIP IN BIO-BOTTLE)  
 Other (BE SPECIFIC AND INDICATE SHIPPING REQUIREMENTS) \_\_\_\_\_

Additional Materials and Cost \_\_\_\_\_

Material Used to Make Product \_\_\_\_\_ Technician Time \_\_\_\_\_

Standard QC & Documentation Time \_\_\_\_\_ Estimated Lead Time \_\_\_\_\_

Manufacturing Manager Approval \_\_\_\_\_

**\* DISCLAIMER: LEAD TIME STARTS WHEN PO IS RECEIVED**

**\* DISCLAIMER: CUSTOM PRODUCTS WILL NOT BE TESTED FOR CROSS-REACTIVITY**