

*Please fill out and fax to (913) 599-0660 or email to cathy@protoxservices.com and we will call you to set up your account or to send the form electronically:
Complete the form, save it to your computer and upload it on the [Contact Us page](#).*

SHIPPING INFORMATION

CONTACT NAME :

COMPANY NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

EMAIL:

BILLING INFORMATION (IF DIFFERENT THAN ABOVE)

CONTACT NAME :

COMPANY NAME:

ADDRESS:

CITY:

STATE:

ZIP:

PHONE:

FAX:

EMAIL:

Acutech™ DOT Blinds – Turnkey Order

Price: \$25 per sample

HOW MANY BLINDS DO YOU NEED? (see Title 49 CFR 40.103)

75% NEGS	NEGATIVES	_____
15% POS	POSITIVES	_____
10% ADULT/SUBS	ADULTERATED	_____
	SUBSTITUTED	_____

WOULD YOU LIKE THESE SAMPLES TO BE: *(Please check one)*

- Sent all at once Spread over this quarter
- Spread over this year or Other, Specify _____

PURCHASE ORDER # _____

We suggest setting up a fictitious account (i.e., Smith's Trucking or the like) with your lab(s) for your blinds.

Please have the Collection Site section of the CCF forms imprinted with:

Industrial Clinic Please have CCF forms mailed to this site along
7917 Bond St. with kits and air bill.
Lenexa, KS 66219
Phone: (913) 599-3535
Fax: (913) 599-0660

On the day we send your blinds to the lab, we will fax the MRO copies to the MRO designated on the CCF form unless otherwise notified.

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