



**Outbreak Food Sample  
Collection Supplies Order Form**

Please fax this form to the Bureau of Laboratories at 610-450-1932.

Item	Quantity Requested	Quantity Sent
Sterile bottles (1 L)		
Food collection bags		
Urine collection cups (100 mL)		
Swabs with transport tubes		
Tongue depressors		
Biohazard transport bags with absorbent sheets		
Laboratory submission forms with clear plastic transport bags		
Shipping boxes (Medium)		
Shipping boxes (Large)		
Cold packs		
Chain of custody forms		

**Agency Name:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Street Address Line 1 (No PO Boxes):** \_\_\_\_\_

**Street Address Line 2:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP Code:** \_\_\_\_\_

**You will be contacted if your shipment will be delayed.**

**For Bureau of Laboratories Use Only**

**Date Mailed:** \_\_\_\_\_ **Carrier:** \_\_\_\_\_ **Entered Shipment:** \_\_\_\_\_

**Initials:** \_\_\_\_\_ **Quick Courier:** \_\_\_\_\_ **USPS:** \_\_\_\_\_