

**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Ron DeSantis**  
Governor

**Vision:** To be the Healthiest State in the Nation

## **SUPPLY REQUISITION FORM**

**Requesting Facility:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Requisitioned By:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please Fax your request to Triage Department : FAX # : **305-325-2564**

		For Lab Use Only	
Test Forms	Quantity Ordered	Sent By	Date
Form 1847 for Lab Services			
Form 655 Drinking Water			
Form 641 for Non- Potable Water			
Form 959 for Rabies			
Other Forms			
Containers	Quantity Ordered	Sent By	Date
Double Containers for HIV Blood Tubes			
Double Containers for Hepatitis Blood Tubes			
Double Containers for Syphilis Serology Blood Tubes			
Double Containers for Parasites Vials			
Double Containers for Enteric Pathogens Vials			
Double Containers for TB Specimens			
Double Containers for GC/Chlamydia Tubes			
Test Supplies	Quantity Ordered	Sent By	Date
Aptima Collection Kit for GC/Chlamydia			
Urine Cups			
GC Plate			