

Order for autogenous vaccines

client/practice (incl. faxnumber or email for order confirmation)	shipping address/veterinary pharmacy	Avicare+ GbR Leopoldstrasse 116 06366 Koethen Germany phone: +49 3496 30 999 55 fax: +49 3496 30 999 51
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pathogen	animal species	quantity of doses	dose-volume	company/business premises (full postal address)	desired strains (serotypes)	remarks
_____ _____ _____ _____ _____	chicken duck turkey _____	_____ ds.	0,5 ml 0,3 ml	_____ _____ _____ address printed on label	_____ _____ _____ _____ _____ request for consultation	_____ _____ _____ _____ _____
_____ _____ _____ _____ _____	chicken duck turkey _____	_____ ds.	0,5 ml 0,3 ml	_____ _____ _____ address printed on label	_____ _____ _____ _____ _____ request for consultation	_____ _____ _____ _____ _____
_____ _____ _____ _____ _____	chicken duck turkey _____	_____ ds.	0,5 ml 0,3 ml	_____ _____ _____ address printed on label	_____ _____ _____ _____ _____ request for consultation	_____ _____ _____ _____ _____

date/signature of veterinarian: