

PT RETEST

2010 ORDER FORM

To order Retest samples, please complete this form and return it with your payment. The following prices are effective through December 31, 2010.

Round #	Analyte	Quantity	Price	Total
IHPAT				
_____	Metals	_____	\$ 295	_____
_____	Silica	_____	\$ 440	_____
_____	Asbestos	_____	\$ 340	_____
_____	Organic Solvents	_____	\$ 285	_____
_____	Diffusive Sampler	_____	\$ 400	_____
(Select badge type: <input type="checkbox"/> SKC <input type="checkbox"/> Assay <input type="checkbox"/> 3M)				
IHPAT Kit Preparation Fee (one-time charge per order).....			\$ 75	_____
ELPAT				
_____	Paint	_____	\$ 285	_____
_____	Soil	_____	\$ 285	_____
_____	Dust	_____	\$ 295	_____
_____	Air	_____	\$ 295	_____
ELPAT Kit Preparation Fee (one-time charge per order).....			\$ 75	_____
EMPAT				
_____	Bacteria <u>or</u> Fungi	_____	\$ 580	_____
_____	Bacteria <u>and</u> Fungi	_____	\$1020	_____
_____	Fungi (Direct Exam).....	_____	\$ 580	_____
_____	Fungi Only (Culturable and Direct Exam) ..	_____	\$1020	_____
_____	Both Bacteria and Fungi (Culturable)	_____	\$1320	_____
and Fungi (Direct Exam)				
EMPAT Kit Preparation Fee (one-time charge per order).....			\$ 75	_____
VA residents please add 5% sales tax				<input type="text"/>

Grand Total \$

Does your laboratory participate in an AIHA PAT program?
 No Yes

Important! Please enter your Lab ID:

Contact Name: _____

Organization: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Telephone: _____

Fax: _____

E-mail: _____

Questions? Call AIHA PAT Programs, LLC at (703) 846-0757.

Payment for proficiency testing programs

Check for \$ _____ made payable to AIHA is enclosed.

Credit Card

Visa MasterCard American Express

Credit Card# _____

Cardholder's Name: _____

Cardholder's Signature: _____

Expiration Date: _____

Purchased Order #



Fax
your forms to
(703) 207-8558



Mail
your forms
and payment to the address
below.