



MedStore Alcohol Fax Order Form

Completed forms can be faxed to **416-978-1142**, emailed to info@uftmedstore.com, or dropped off in person.

Product Information

For current pricing and product information, refer to MedStore Online.

Product SKU	Description	Requested Quantity
22734	Ethyl alcohol, 100% bonded, 500ml	
39752	Ethyl alcohol, 100% anhydrous, 4L	
39753	Ethyl alcohol, 95% UN#1170, 4L	
2391	Ethyl alcohol, absolute UN#1170, 25L	
2389	Ethyl alcohol, 95% UN#1170, 25L	
35184	Ethyl alcohol, absolute UN#1170, 45gal	
35132	Ethyl alcohol, 95% UN#1170, 45gal	

Payment Method

Please indicate either credit card or grant account payment.

Credit Card (MC/VISA)

Name of Cardholder

Credit Card Number

____ / ____
Expiry Date

AMS/FIS Grant Account Numbers

CC#

CFC#

F# (and/or IO#/CI#)

Delivery Details

Please ensure order contact has been delegated purchasing/signing authority by Principal Investigator. Refer to MedStore Online for appropriate forms.

Address (Building Name and Room Number)

Phone Number

Name of Principal Investigator

Name of Order Contact

Authorized Signature

Thank you for your order.