

# 2010-2011 Influenza Vaccine ORDER FORM



Date
GPO Affiliation

Telephone	Fax	Purchase Order Number
FFF Account Number	DEA Number	
Order Placed By	Email Address	
Customer's Special Instructions		

Ship To	Bill To
Attn:	Attn:

**PREFERRED DELIVERY DATE:** \_\_\_\_\_ If your preferred delivery date is not available, an FFF representative will call you to confirm an alternate date.

I accept delivery as availability permits (ANY TIME BEFORE requested delivery date).

I only accept delivery within one (1) week of requested delivery date.

Item No.	Description	Dose	U/M	Price*	Qty. in Boxes or Vials
<b>Merck / CSL™</b>					
FLU211010	<b>Afluria® Influenza Virus Vaccine</b> 5mL 10-dose vial 6 months of age and older	<b>10.75*</b>	Vial	<b>107.50*</b>	
FLU211025	<b>Afluria® Influenza Virus Vaccine</b> 0.25mL prefilled syringes, needleless, 10 per box 6-35 months of age (preservative free)	<b>13.00*</b>	Box of 10	<b>130.00*</b>	
FLU211001	<b>Afluria® Influenza Virus Vaccine</b> 0.5mL prefilled syringes, needleless, 10 per box 36 months of age and older (preservative free)	<b>11.50*</b>	Box of 10	<b>115.00*</b>	
<b>Novartis Vaccines</b>					
FLU111310	<b>Fluvirin® Influenza Virus Vaccine</b> 5mL 10-dose vial 4 years of age and older	<b>10.50*</b>	Vial	<b>105.00*</b>	
FLU111302	<b>Fluvirin® Luer Lock Influenza Virus Vaccine</b> 0.5mL prefilled syringes, needleless, 10 per box 4 years of age and older	<b>12.00*</b>	Box of 10	<b>120.00*</b>	
<b>sanofi pasteur</b>					
FLU138515	<b>Fluzone® Influenza Virus Vaccine</b> 5mL 10-dose vial 6 months of age and older	<b>10.14*</b>	Vial	<b>101.40*</b>	
FLU101050	<b>Fluzone® Influenza Virus Vaccine</b> 0.5mL prefilled syringes, needleless, 10 per box 36 months of age and older (no preservatives)	<b>11.35*</b>	Box of 10	<b>113.50*</b>	
FLU101010	<b>Fluzone® Influenza Virus Vaccine</b> 0.5mL single dose vial, 10 per box 36 months of age and older (no preservatives)	<b>11.35*</b>	Box of 10	<b>113.50*</b>	
FLU101025	<b>Fluzone® Influenza Virus Vaccine</b> 0.25mL prefilled syringes, needleless, 10 per box 6-35 months of age (no preservatives)	<b>12.14*</b>	Box of 10	<b>121.40*</b>	
<b>Sharps Disposal By Mail System® is available!</b>				<b>Total Quantity</b>	

Customer represents warrants and agrees that Customer is purchasing products from FFF for its own use and use by its affiliated healthcare providers in delivering services to patients and not for resale. Customer acknowledges that FFF is relying on this representation in making its decision to sell products to Customer.

\* Federal Excise Tax of \$.75 per dose (\$7.50/vial or box of 10 prefilled syringes) will be added to each order and is not included in above prices.

Orders can be cancelled or modified at any time on or before June 30, 2010.

Please complete and fax this form to FFF Enterprises: 800-418-4333.  
If you have questions, call 800-843-7477 or visit MyFluVaccine.com.

I have ordered the quantities listed above and agree to the terms that apply:  
Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for supporting FFF's  
Guaranteed Channel Integrity!

