



Email / Mail Order Form

indiana Pathology images

inQUIZator: Mycology	Single user / Site	\$75.00 / \$300.00		
inQUIZator: Parasitology	Single user / Site	\$75.00 / \$300.00		
Bacteriology I Image Atlas	Single user / Site	\$110.00 / \$500.00		
Mycology Image Atlas	Single user / Site	\$110.00 / \$500.00		
Parasitology Image Atlas	Single user / Site	\$110.00 / \$500.00		
Hematology Image Atlas	Single user / Site	\$175.00 / \$750.00		
Body Fluid Image Atlas	Single user / Site	\$175.00 / \$750.00		
Abnormal Red Blood Cell Poster		\$45.00 each		
Abnormal White Blood Cell Poster		\$45.00 each		
Normal WBC & Platelet Cell Morphology Poster		\$45.00 each		
Platelets & Microorganisms Poster		\$45.00 each		
Morphology of Anaerobes Poster		\$45.00 each		
Urine Sediments I Poster		\$45.00 each		
Urine Sediments II Poster		\$45.00 each		
Body Fluid I Poster		\$45.00 each		
Body Fluid II Poster		\$45.00 each		
Body Fluid III Poster		\$45.00 each		
Abnormal Red Blood Cell Bench Aid		\$50.00 /pkg of 10		
Abnormal White Blood Cell Bench Aid		\$50.00 /pkg of 10		
Platelets & Microorganisms Bench Aid		\$50.00 /pkg of 10		
Normal WBC & Platelet Cell Morphology Bench Aid		\$50.00 /pkg of 10		
Urine Sediments I Bench Aid		\$50.00 /pkg of 10		
Urine Sediments II Bench Aid		\$50.00 /pkg of 10		
One each of the above (6) Bench Aids		\$45.00 /pkg of 6		

Sub Total

Shipping and Handling (**\$10.00 U.S.A.** / International - contact for quote)

7% Indiana Sales Tax (Indiana Residents Only)

Total

Shipping address

Name: _____
 Address: _____
 Address: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: () - _____ Email: _____

Payment information:

- Check Enclosed (Payable to Indiana Pathology Images)
- Credit card

Card number: _____ **Expiration date:** _____

Signature: _____ **CVV #:** _____

Institutional Purchase Order Number: _____

Billing Address

Name: _____
 Address: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: () - _____

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