



Pharmaceuticals
Your Unmatched Distribution Channel

2017-2018 INFLUENZA VACCINE ORDER FORM



Pharmaceuticals
Your Unmatched Distribution Channel

Online Ordering available at our website—www.shopfluvaccines.com

Toll Free Phone # 877.226.2266 | Toll Free Fax # 877.718.0118 | Info@abopharmaceuticals.com

ABO Account # _____ ABO Rep WEB

Shipping Information

Bill To: _____
 Contact Name: _____
 Phone: _____ Fax: _____
 E-Mail Address: _____
 Credit Card #: _____
 Name On Card: _____
 Exp: _____ Sec Code: _____ Zip: _____

Ship To: _____
 Address: _____
 Suite/Unit #: _____
 City/State/Zip _____
 Requested Delivery: _____
 Office Hours: _____
 Contact Name: _____

Brand/Manufacturer/Indication	Age Indication	Price	Quantity
NO PREFERENCE – VIALS OR SYRINGES FIRST BRAND AVAILABLE AND LOWEST COST.....			

Seqirus – Trivalent 20% Returnable, Call For Details

Afluria Influenza Vaccine 5mL Vial 10 Doses/Vial	LIMITED SUPPLY, CALL FOR DETAILS	5 Years & Older <small>ACIP recommends 9 years and older</small>	112.00	Vials
Afluria Influenza Vaccine .5mL 10 Single Dose Pre-Filled Syringes *THIMEROSAL, MERCURY, LATEX FREE*	LIMITED SUPPLY, CALL FOR DETAILS	5 Years & Older <small>ACIP recommends 9 years and older</small>	124.00	Boxes
Fluvirin Influenza Vaccine 5mL Vial 10 Doses/Vial		4 Years & Older	112.00	Vials
Fluvirin Influenza Vaccine .5mL 10 Single Dose Pre-Filled Syringes		4 Years & Older	124.00	Boxes

Seqirus – Quadrivalent 20% Returnable, Call For Details

Afluria Influenza Vaccine <u>Quadrivalent</u> 5mL Vial 10 Doses/Vial *NO LATEX*		5 Years & Older	120.00	Vials
Afluria Influenza Vaccine <u>Quadrivalent</u> .5mL 10 Single Dose Pre-Filled Syringes *THIMEROSAL, MERCURY, LATEX FREE*		5 Years & Older	130.00	Boxes
Flucelvax Influenza Vaccine <u>Quadrivalent</u> 5mL Vial 10 Doses/Vial *ANTIBIOTIC, LATEX FREE*		4 Years & Older	140.00	Vials
Flucelvax Influenza Vaccine <u>Quadrivalent</u> .5mL 10 Single Dose Pre-Filled Syringe *PRESERVATIVE, ANTIBIOTIC, LATEX FREE*		4 Years & Older	150.00	Boxes

Seqirus – 65+ Years and older Trivalent 20% Returnable, Call For Details

FLUAD 65+ Influenza Vaccine .5mL 10 Single Dose Pre-Filled Syringes *NO PRESERVATIVES*		65 Years & Older	372.00	Boxes
--	--	------------------	--------	-------

GSK— Glaxo Smith Kline— Quadrivalent

Fluarix <u>Quadrivalent</u> Influenza Vaccine .5mL 10 Single Dose Pre-Filled Syringes	SOLD OUT	3 Years & Older	169.00	Boxes
Flulaval <u>Quadrivalent</u> Influenza Vaccine 5ml 10 doses Multi Dose Vial	SOLD OUT	6 Months & Older	159.00	Vials

Sanofi Pasteur – Pediatric, Quadrivalent and High Dose – 20% Returnable , Call for Details

Fluzone Influenza Vaccine <u>Quadrivalent</u> Pediatric .25mL 10 Pre-Filled Syringes *NO PRESERVATIVES, NO LATEX*		6-35 Months	175.00	Boxes
Fluzone Influenza Vaccine <u>Quadrivalent</u> 5ml 10 doses Multi Dose Vial *NO LATEX*		6 Months & Older	155.00	Vials
Fluzone Influenza Vaccine <u>Quadrivalent</u> 10 Single Dose Pre-Filled Syringes .5ML *NO PRESERVATIVES, NO LATEX*		36 Months & Older	167.00	Boxes
Fluzone Influenza Vaccine <u>Quadrivalent</u> 10 Single Dose Pre-Filled Vials (UD) .5ML *NO PRESERVATIVES, NO LATEX*		36 Months & Older	167.00	Boxes
Fluzone <u>HIGH DOSE</u> Influenza Vaccine .5mL 10 Single Dose Pre-Filled Syringes *65+, *NO PRESERVATIVES, NO LATEX*		65 Years & Older	399.00	Boxes

(FET) Federal Excise Tax \$.75 Per Dose (\$7.50 Per Box / Vial and is not included in the above price... Prior to Shipment a Current Pharmaceutical Wholesale, DEA or State Medical License must be on file and verified. Allocations based on the current market conditions and manufacturer availability. ABO will not be held accountable or assume any financial responsibility for any product mis-shipsments, delays or damages; including any errors being made by UPS/Fed Ex. Freight is not included unless stated in above Flu Vaccine order.. Please Ask ABO Account Rep for details. Signing below will be used as verification to all terms and conditions listed. You Agree that this is a contract binding order which may only be amended or cancelled with a ABO Pharmaceuticals Manager Approval. Before Returns can be made a ABO Return Authorization form is required before any credits that will be issued. Contact ABO Pharmaceuticals for return details.

AUTHORIZED BUYER SIGNATURE (REQUIRED)

PRINT NAME (REQUIRED)

____/____/____
DATE

101017ABO