

PS31127-R-002-T
RUN DATE: 11/15/10
RUN TIME: 13:15

PURCHASING/ACCOUNTS PAYABLE SYSTEM
REQUISITION AND ADDON LISTING

PAGE: 1

T705822

PURCHASE REQUISITION DATE ENTERED: 11/05/10 *** FOR 09-11 BIENN ***

BUDGET	BUDGET#	DEPT CONTACT	PHONE	* INVOICE *
TITLE: ROOSEVELT LAB	08-7074	SISSY SCHULTZ	(206) 543-4486	* BOX NUMBER *
DEPT: UWMC LABORATORY MED	DEL NO LATER THAN	TECH CONTACT	PHONE	* 357110 *
	00/00/00			*****
DELIVER TO:				
UWMC LAB MED E160 ROOSEVELT II	NO EARLIER THAN	SERVICE BEGIN	SERVICE END	READY *****
4245 ROOSEVELT WAY NE	00/00/00	00/00/00	00/00/00	TO *
SEATTLE	WA 98105-0000	ATTACHMENTS		FILE *
	BOX: 357110	ASSIGNED TO STEVE GOVE		*****
ATTN:				

PURCHASE ORDER
SIGNED BY: * ERI *VR* NSF : 39.29 : 28B.20 : 43:105 : OTHER * * GRAND *
* TOTAL \$ 2,111.16 * FOR 1 ITEM

PRICE CONSIDERED FAIR AND REASONABLE BASED ON PURCHASER'S KNOWLEDGE OF MARKET/COMMODITY (PO NOT GT \$3,500.00)

GENERAL COMMENTS:

ORDER MUST BE RECEIVED BY CAP BY 12/1/2010
CAP# 246373001
ORDER # 838775 02 33
A/R# 24637400
FAX ORDER COPIES TO: 847-832-8168

REQUISITION-HISTORY

STATUS	PERFORMED	BY	ACTION
090: PERFORM ENCUMBRANCE	11/05/10 15:46	SANDY SULLIVAN	ENCUMBERED
110: AWAITING ATTACHMENTS AT PURCHA	11/15/10 12:49	NORMA CHUA	COLLECTED
400: BUYER TO BE ASSIGNED	11/15/10 12:50	NORMA CHUA	ASSIGNED TO LAB
500: RELEASED TO BUYER	11/15/10 12:50	NORMA CHUA	RELEASED TO LAB

PURCHASE REQUISITION

DATE ENTERED: 11/05/10

*** FOR 09-11 BIENN ***

VENDOR VENDOR-NUMBER 108829-04
COLT OF AMER PATHOLOGISTS
01

325 WAUKEGAN RD

NORTHFIELD

ATTN: 800-323-4040

IL 60093-2750

WRITTEN ORDER

PHONE ORDER

CONFIRMING P.O.

DATE

PLACED BY

DELIVERY

F.O.B.

SHIP VIA

TERMS

VENDOR CONTACT

ITEM G/C COM-CODE DESCRIPTION:

QUANTITY UNIT

UNIT PRICE

ITEM PRICE OB-SB-SS

2011 PROFICIENCY TESTING FOR ROOSEVELT LAB

1.00 LT

1,928.000

2,111.16 05 30 00

ADDON DATA FOR BUDGETS:

08-7074 ROOSEVELT LAB

START: 07/01/94

END: 00/00/00

SHARE-% 100

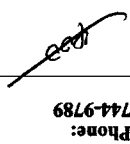
SHARE-\$

0.00

PHONE:

TASK OPTION PROJECT:

FUNDING SOURCE
CLASSIFICATION
CONTRACT

DEPARTMENT		LABORATORY MEDICINE		Sissy SCHULTZ, TEL: 206-543-4466		Sissy2@U.WASHINGTON.EDU		PERSON REQUESTING		TAMMY WING YAN		BUDGET TITLE		08-7074-46	
744-9789		Phone:													
DEPARTMENT MAIL		BOX 35710		DEPARTMENT FMS #		7074-46		DATE		10/28/2010		BUYER			
DELIVER TO: (BLDG. NO. AND ROOM NO.): UW ROOSEVELT LAB, RM# E-160															
QUANTITY	UNIT OF ISSUE	ITEM / CATALO	ITEM	(PLEASE GIVE FULL DESCRIPTION / SIZE)	NAT. CLASS	ESTIMATED UNIT PRICE									
1	LOT			2011 PROFICIENCY TESTING FOR ROOSEVELT LAB		\$1928.00									
REMARKS FAX AT : 847-832-8168							RECOMMENDED								
VENDOR'S NAME AND PHONE: C.A.P.							800-323-4040								
VENDOR NUMBER															
PLEASE NOTE															
FOR NON-STOCK:															
VENDOR'S ADDRESS: 325 WAUREGAN RD NORTHFIELD, IL 60093															
CONFIRMED WITH ESTIMATED TIME OF ARRIVAL															
APPROVAL MARY T SCHULTZ 10/28/2010															

70582X



Order No. 838775 03 45

CAP No. 246373001

A/R No. 24637400

2011 Laboratory Improvement Programs Order Form

College of American Pathologists
325 Washington Rd.
Northbrook, IL 60062-9750
Tel: 800-323-4000 option 1
Fax: 847-433-7000 option 1
Fax: 847-433-8168 | www.cap.org

FAX TO: 847-832-8168

GENERAL

LAP



Payment Information: Please print clearly in block letters. ONE of the following methods of payment in US dollars.

Check Number (Payable to College of American Pathologists)

Purchase Order Number

Amount \$

Payment Terms

Card Number

Card Holder Name

Expiration Date (MM/YY) /

Signature

Card Type: ☐ AMEX ☐ VISA ☐ MasterCard

On or after Nov 1, 2010, terms are Net 30.
Invoice due date will be Dec. 1, 2010. For orders placed
* Terms: For orders placed before Oct. 31, 2010, the
Invoice due date will be Dec. 1, 2010. For orders placed

Edited by:

MOOP ☐ CT ☐ TEF ☐ NOPO ☐

(See order #)

Transfer ☐ Wire ☐

Billing Information

c/o Accounts Payable

Shipping Contact (Print Name)

Shipping Contact (Ext. Number)

Shipping Contact (Email Address)

Shipping Contact (Phone)

Country Code

Account Number

Address

City

State

Zip

Country

Accts Payable

3917 University Way NE Box 351130

Seattle

WA

98105-6613

12322

Do not mark changes on the Institution Name or Name of Laboratory fields below.

Institution Name

University of Washington

Name of Laboratory

705882

cap College of American Pathologists
 323 Westcreek Rd.
 Northbrook, IL 60062-2750
 Tel: 800-323-4000 option 1
 Fax: 847-432-7000
 Email: 847-432-8168 | www.ccap.org

GENERAL LAP
 FAX TO: 847-832-8168
 CAP No. 246373001
 A/R No. 24637400

2011 Laboratory Improvement Programs Order Form

* Enter zero in revised quantity field to delete items.

LN	Product Code	Description	Quantity	Revised Quantity*	Unit Price	Extended Amount
1	C3	CHEMISTRY-GENERAL, COMPREHENSIVE	1		\$390	\$390
2	CMMP	CLINICAL MICROSCOPY MISCELLANEOUS COLOR	1		\$116	\$116
3	CMP	CLINICAL MICROSCOPY COLOR PHOTOGRAPHS	1		\$188	\$188
4	D6	RAPID STREP A ANTIGEN DETECTION	1		\$201	\$201
5	ESR	ERYTHROCYTE SEDIMENTATION RATE	1		\$198	\$198
6	FH9P	HEMATOLOGY COMP, AUTODIFF W/PHOTOGRAPHS	1		\$339	\$339
7	OGB	FECAL OCCULT BLOOD	1		\$130	\$130
8	VR4	VIROLOGY AG (NON-IF) DETECT	1		\$366	\$366

Page Total \$ 1928





70584x

Order No. 838775 05 69

CAP No. 246373001

A/R No. 24637400

2011 Laboratory Improvement Programs Order Form

College of American Pathologists
225 Waukegan Rd.
Northfield, IL 60093-2750
Tel: 800-323-4000 option 1
Fax: 847-432-8166 | www.ccap.org



FAX TO: 847-832-8168

GENERAL

LAP

Enter the quantity to order these new products.

New Product Description	Quantity	Unit	Extended Amount	New Product Description	Quantity	Unit	Extended Amount
1,25 Dihydroxy Vitamin D (BMV1)			\$380	Rapid Matrix (PMAL)			\$360
Accuracy Based Vitamin D (ABVD)			\$400	Rapid Total White Blood Cell Count (RWBC)			\$306
Bacterial Strain Typing, Enterococcus (BSTE)			\$220	Soluble Transferrin Receptor (STR)			\$320
Bacterial Strain Typing, Staphylococcus (BSTS)			\$220	Vancomycin-Resistant Enterococcus (VRE)			\$200
Bone Specific Alkaline Phosphatase (BMV2)			\$380	Virtual Peripheral Blood Smear (VPBS)			\$358
Campylobacter (CAMP)			\$198	Vitamin A (BAV3)			\$380
Electronic Crossmatch (EAM)			\$350	Vitamin E (BMV4)			\$380
Expanded Bacteriology (DEX)			\$324	ZAP-70 Analyte by Flow Cytometry (ZAP70)			\$400
Facial Lactoferrin (FLAC)			\$250	Laboratory Services for the New Product			
Fields of View, Sweatpatch Whole Slide Images (FOVX)			\$398	Laboratory Department (CP11)			\$395
Fields of View, Sweatpatch Whole Slide Images Add'l Participants (FOVX1)			\$128	Transfusions (CP12)			\$395
Fields of View, Thinfilm Whole Slide Images (FOVM1)			\$398	Surgical Pathology Report Details (CP13)			\$395
Fields of View, Thinfilm Whole Slide Images (FOVM1)			\$128	Cervical Consequences of Specimen Rejection (CP14)			\$395
Fields of View, Thinfilm Whole Slide Images (FOVM1)			\$128	15189 Walkthrough (ISOEDWT)			\$325
Fungal Serology (FSER)			\$310	QMS Implementation Roadmap (ISOEDRM)			\$325
Gastroenteritis (FGAL)			\$498	Root Cause Analysis (ISOEDRC)			\$325
Kidney Stone Risk Assessment (KSA)			\$800	Document Control (ISOEDDC)			\$325
Oral Fluid for Drugs of Abuse (OFD)			\$1752	Quality Manual Development (ISOEDQM)			\$325
PMAL/PMVA (PMV2)			\$2080	Internal Audit (ISOEDIA)			\$325
Post-Vasectomy Sperm Count (PV)			\$254	Management Review (ISOEDMR)			\$325



Page Total \$ 0

