





## **Needle Pick-Up Form**

AGENCY: DATE SUBMITTED:

ITEM	QUANTITY OF PACKAGE	AMOUNT
<b>Sharps container - 1 L</b> yellow square	Each	
	Case of 100	
<b>Sharps container - 5 L</b> red round	Each	
	Case of 40	
Sharps container - 18 gallon large yellow flip top	Each	
	Case of 5	
Biohazard Box and Liner	Each	
Number of needles returned**		

<sup>\*\*</sup>Please keep track of approximately how many needles are returned to you (not an exact count, just an estimate)

Email order to the following email addresses at least 2 business days before supplies needed to SCOrders@wrha.mb.ca

We will notify you when your order is ready for pick-up.

☐ ORDER FILLED FILLED BY: