

# REQUEST FOR DUI BLOOD COLLECTION KITS

Date of Request:		
Name of Medical Facility:		
Address:		
City:	State:	Zip:
Phone Number:		
Contact Person(s):		

DESCRIPTION	NO. OF KITS REQUESTED
<p>State Police DUI Blood Collection Kits</p> <p>NOTE: Because there is an expiration date on the blood sample vials contained in the DUI Blood Alcohol Kit, please do not order more than 10 kits at a time.</p> <p>These kits will only be used when a Police Officer requests a blood draw in a criminal matter (excluding sexual assault).</p>	
<b>TOTAL</b>	

SEND TO: [bloodkits@wvsp.gov](mailto:bloodkits@wvsp.gov)  
 Elena Burton  
 Telephone: 304-746-2121