

ENDOMETRIAL FUNCTION TEST® (EFT®)

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Please use this form to request biopsy and patient information supplies. Please fill in the quantity needed, your shipping address and

Fax to: 203-785-4477

Item	Quantity	Comments
Patient brochures		
Physician brochures		
DVD "EFT: The Soil Test"		
Biopsy mailing tubes		
FedEx preaddressed airbills		
Other		

Please note that all request forms are available at: endometrialfunctiontest.com as pdfs.

Your shipping address:

Name	
Address	
Address	
City, State, Zip	
Your phone number	
Your email	

Questions or problems? Contact:

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