EPI-PEN RECERTIFICATION FORM

Agency		Date
Address	City, State Zip	Phone
Contact Person	Email	Fax

Check the lot number and expiration date of each Epi-Pen in your inventory document them below:

Epi-Pen (Adult 0.3mg)	
Lot #	Expiration Date

Epi-Pen (Junior 0.15mg)	
Lot #	Expiration Date

Return this form to the SVMCA offices at:

1000 Houghton Ave.
Saginaw, MI 48602
Fax: (989) 583-7941