

**Castlereagh Pharmaceuticals**  
**POULTRY WORKERS VACCINATION PROGRAMME 2006/07**  
**Influenza Vaccine - ORDER FORM**

**Date of Order:**

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**Practice Code:**

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**Practice Name:**

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**Address:**

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**Postcode:**

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**Phone No:**

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**Fax No:**

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**Opening Times:**

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**Contact Name:**

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<b>Product Name</b>	<b>Quantity must be in TEN'S</b>
Inactivated Influenza Vaccine	

6A Prince Regent Road, Castlereagh, Belfast BT5 6QR

**Tel: 028 9079 5799 Fax: 028 9079 6303 email: [orders@castlereagh.uk.com](mailto:orders@castlereagh.uk.com)**

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