



MDPH Request for Surplus Supplies COVID-19

Requestor Information				
	Requestor's Name and Title:	Requestor's Email:	24/7 Phone Number:	
Entity (Department, Agency, Company, etc.):				
Delivery Address:				
Delivery Notes/Instructions:				
Equipment Requested				
Request Information	Item	Quantity	Item	Quantity
	KN95		Surface Disinfecting Wipe (Canister of 125, enter # of canisters)	
	N95 (Medical)		Alcohol Hand Sanitizer (8 oz. Bottle)	
	Face Shield		Alcohol Hand Sanitizer (12 oz. Bottle)	
	Shoe Cover (Enter individually, not pairs)		Alcohol Hand Sanitizer (16 oz. Bottle)	
	Head Covering (Bouffant Cap)		Non-Alcohol Hand Sanitizer (16 oz. Bottle)	
	Heavy-Duty Cleaning Gloves (Enter individually, not pairs)		Apron	
	Thermometer (Infrared)		Coverall	
			Alcohol Prep Pad (Enter individually)	
Instructions	<ul style="list-style-type: none"> Submit the completed form to Covid19.Resource.Request@mass.gov All responses must be typed. Handwritten forms will not be processed. Enter quantity of individual items requested (eaches). Unless otherwise noted, do not enter box or case count. Submission of this form does not guarantee fulfillment. Supplies are limited and items will be distributed in an equitable manner based on demand. 			

Sample Item Photos

Note: Items received may be different color or brand

Cleaning Gloves (Heavy Duty)



Apron

