



Short-Dated Vaccine Report Form

Date Submitted: _____

Provider Site: _____ VFC PIN#: _____

Provider Site Address: _____

Contact: _____

Telephone Number: _____ Fax: _____

Days and Times Office Is Open: _____

The following vaccines are due to expire within 60 to 90 days (2-3 months), and will not be used by the practice before the expiration date:

Vaccine	NDC Number	Lot Number	Expiration Date	# of Doses

INSTRUCTIONS TO PROVIDERS

Please complete the form and fax to the VFC Program, 302-741-9102. A VFC Program Representative will call site to schedule the vaccine pick up with the person listed as the contact on this form if we have another site that will be able to use the vaccine.

***Please Note: This form is used to advise the VFC Program that your site has vaccine that you will not be able to use before expiration date. This is not a return form.**