



# FAX

**To:** WestVet  
Marketing Dept.  
**From:**  
**Company:**  
**Fax:** 208.375.1606  
**CC:**  
**RE:** Request for Materials  
**Pages Including Cover:** 1

**SURGERY**  
**Jeff D. Brourman, DVM, MS**  
Diplomate American College of  
Veterinary Surgeons

**John C. Chandler, DVM, MS**  
Practice Limited to Small Animal  
Surgery

**INTERNAL MEDICINE**  
**Kathleen E. Graf, DVM**  
Diplomate American College of  
Veterinary Internal Medicine

**FELINE BEHAVIOR**  
**Hazel C. Carney, DVM, MS**  
Diplomate American Board of  
Veterinary Practitioners

**PHYSICAL THERAPY**  
**Becky Paulekas, DVM, MPT**  
Rehabilitation, Acupuncture,  
Chiropractics

**EMERGENCY &  
CRITICAL CARE**  
**Andrew Gendler, DVM**

**Dan Gillis, DVM**

**Sara Liddell, DVM**

**Laura Lefkowitz, DVM**

**Nell Dalton, DVM, MS**

## Notes:

Please send the following materials to our clinic:

Name of Clinic: \_\_\_\_\_

Address: \_\_\_\_\_

Phone # \_\_\_\_\_

- \_\_\_\_\_ # of Referral form packets
- \_\_\_\_\_ # of Business cards
- \_\_\_\_\_ # of Magnets
- \_\_\_\_\_ # of Hospital brochures
- \_\_\_\_\_ # of Physical therapy brochures
- \_\_\_\_\_ # of Emergency quick reference cards
- \_\_\_\_\_ # of Business card holders
- \_\_\_\_\_ # of Brochure holders

I would like these by a specific date:\_\_\_\_\_.