

Nursing Skills Lab Supplies Kit Charge Form

Student Name: _____ Student ID: _____

Item Needed	Cost	Quantity Needed	Total Cost
Complete Supplies Kit	\$140		
Catheter Kit	\$20		
Central Line Dressing Kit	\$18		
Cinch Bang	\$8.50		
Scissors	\$8.50		
Goggles	\$8		
Penlight	\$2		
Other:			
Total to be charged to student account:			

Acknowledgment charges are being made to student account:

Student Signature _____ Date: _____

Charges Requested by: _____ Date: _____