



# MEBA BENEFIT PLANS

MEBA MEDICAL & BENEFITS PLAN  
MEBA PENSION TRUST  
MEBA TRAINING PLAN  
MEBA VACATION PLAN

1007 EASTERN AVENUE, BALTIMORE, MARYLAND 21202-4345 • (410) 547-9111

## REQUEST FOR USCG PERIODIC DRUG TESTING FORM CG-719P (Rev 7/02)

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

SS# \_\_\_\_\_

SPECIMEN ID# \_\_\_\_\_

Please send my USCG form to the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DONORS SIGNATURE: \_\_\_\_\_

Please fax the request to University Services. FAX: 1-215-637-7944