Need Medication Disposal Bags?

Enter the number of each size that you would like and then click the **SUBMIT** button or **EMAIL** *projecthope@alaska.gov* to send your request.

Name:

Mailing address:

Disposal bags:

Small
Small
15 Pills/2 oz. liquid/
2 patches
6 patches
12 patches
6 patches
6 Pills/6 oz. liquid/
15 patches
6 patches
12 patches
6 Pills/6 oz. liquid/
6 patches
6 Pills/6 oz. liquid/
90 Pills/12 oz. liquid/
90 Pills/12 oz. liquid/
90 Pills/12 oz. liquid/
450 Pills/60 oz. liquid/
60 patches