

**Biospecimen Accessioning Processing**  
**Fax Supply Order Form – No Cover Sheet Necessary**  
Fax to Research Kit Building @ 507-538-4103

**NOTE: Form must be either typed or printed legibly and filled out completely.**

**Study ID: MAY04-4-01**

Investigator: \_\_\_\_\_

Order Placed By: \_\_\_\_\_ Phone #: (    ) \_\_\_\_\_

Email: \_\_\_\_\_ Fax #: (    ) \_\_\_\_\_

**Complete Address (kits sent to):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ALLOW AT LEAST TWO WEEKS TO RECEIVE THE KITS.**

**NOTE:** Kits will be sent via FedEx® Ground at no additional cost to the participating institutions. Kits will not be sent via rush delivery service unless the participating institution provides their own FedEx® account number or alternate billing number for express service. **The study will not cover the cost for rush delivery of kits.**

**Date Needed:** \_\_\_\_\_  
**(Please be specific)**

**Fed Ex account number (Rush deliveries only)** \_\_\_\_\_

<b><u>Type of Kits</u></b>	<b><u># of Kits Needed</u></b>
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<u>Kit #1 - Blood Collection Kit</u>	_____
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<u>Kit #2 – Research Mucosal Biopsies Kit</u>	_____
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**Total Kits** \_\_\_\_\_

**Questions?** Contact the Biospecimen Resource Manager listed on the Protocol Resource page of the protocol (507-538-7898).