

Medical College of Wisconsin - Rat Request

Medical College of Wisconsin
 8701 Watertown Plank Rd.
 Milwaukee, WI 53226
 USA

Date: _____

From:

Name: _____

Address: _____

Phone: 414-456-4887
 Fax: 414-456-6516
<http://www.mcw.edu/HMGC.htm>



Principal Investigator (PI) Name: _____

PI Phone: _____

PI Email: _____

Lab Staff Contact Name: _____

Lab Staff Contact Email: _____

Vet Contact Name: _____

Vet Email: _____

Vet Fax: _____

Who will be paying for shipping?: **MCW** Shipping costs will be added to the bill. **Receiver** List Courier and Account # below

Courier Name: _____ **Account Number:** _____

Animals are transferred at weaning (21 days); we do not maintain rats older than 21 days of age unless a request is made prior to weaning, since no "stock" of rats is maintained. Please order well in advance of planned studies to allow rats to reach appropriate age. The investigator will be charged for animals, regardless of whether or not they are utilized, and will begin paying per diem starting at 28 days of age. Fill in all requested information.

#	Strain of Rat	Gender M/F	Date Needed	Quantity	Additional Instructions

Comments:

Investigator/Requestor signature:
 (to approve animal transfer & billing)

_____ Signed By (Type Name)