Institutional Animal Care and Use Committee (IACUC) Request to Purchase Animals

Date:

Name: Dept/Company: Phone:					IACUC Protocol #: P.O. # for Purchase: Account # for Purchase:			
Email:				F:		0:	A	\:
Vendor Name and Address:				Billin	Billing Address:			
Phone Fax:	: ase Details			Name Phone Email	e:			
i di Cili	ID/Stock N	umber	Species	Straii	n s	Sex		
No.			ion (e.g. age, ge				rice	Extension
					ı			
		1						
Earliest date needed?							Fee:	
How long do you anticipate housing these animals? Approved facility to ship to?					-Gateway Shipping:			
	Account F:	# for per-di	em charges:	A:		T	otal:	
specific associ	ed above using ated with hous	g the P.O. r ing these a	e WPI Animal Fanumber indicated nimals in the WF	l. I also agre	ee to pay ap	opropriate pe		
_	•		2. 2. 2009.100	D-11-				NIh
	nal Facility Use Only est Received:	Date	Order Placed:	Date				Number
Neque	Ship Date:		Arrival Date:		Animal Purchase Number:			

IACUC Form RPAF (December 2012)

Principal Investigator: