

BIOLOGY SHIPPING FORM

SHIP TO ADDRESS:

DATE:

NAME:

ADDRESS:

CITY:

STATE:

ZIP CODE:

LAB NAME:

ACCOUNT#:

DEPARTMENT (**PLEASE CIRCLE ONE**): MCDB OR EEMB

DOMESTIC OR INTERNATIONAL (**PLEASE CIRCLE ONE**): PLEASE REFER TO THE SHIPPING GUIDE WHEN SHIPPING INTERNATIONAL.

DRY ICE (**PLEASE CIRCLE ONE**): YES OR NO

HOW MANY POUNDS IS THE DRY ICE: WEIGHT _____ LB _____ OZ

NUMBER OF PACKAGES: _____

DESCRIPTION OF MATERIAL:

SENDER NAME (**PLEASE PRINT**):