

Request Information

Institution/Organization:

Name: Progenitor

Type:

For Profit Non-Profit

Tax Exempt No.: 501(c)(3)

Investigator Contact Information:

Name: Wayne *

Phone: McGarvis *

Fax:

E-mail: ofbpc@gmail.com *

Shipping Information for Animal Facility:

Name/Organization: Progenitor

Contact Name: Wayne McGarvis

Contact Phone:

Contact Email: waynemcgarvis@gmail.com

Address: 572 E. Atlast Road

City: Peabody

State/Province: Massachusettes

Zip/Postal Code: 01960

Country: USA

Billing Information:

Institution/Organization: Progenitor Technologies

ATTN:

Contact Name: (if different than investigator)

Contact Email:

Address:

City:

State/Province:

Zip/Postal Code:

Country:

Phone #:

Purchase Order #:

RRRC Product Use Limitations:

Any recipient of rats or other material from the RRRC agrees to the terms and restrictions of the RRRC Outgoing MTA. Recipient and institutional official must execute the [RRRC Outgoing Material Transfer Agreement \(MTA\)](#) before the request will be shipped.

Animals Requested (quantities are limited):

Strain Requested:

RRRC Catalog # Requested: *

of Live Males:

of Live Females:

Genotype Preferred (if available):

of Straws - Embryos:
(20 Cryopreserved Embryos per straw)

of Straws - Sperm:

Cryo. Resuscitation:

ES Cell Line:

Other (e.g. tissue):

Attending Veterinarian or Contact Person for Animal Shipment Authorization: (Animals will not be shipped until the RRRC receives authorization for animal receipt by the Receiving Investigator's institution.)

Name:

Phone:

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Name:

Phone:

E-mail: