**Tierforschungszentrum**

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**Exportformular**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SENDER** |  |  |  |  |  |  |
| Researcher: |        | Email: |        |
| Phone No.: |        | No. of the experimental protocol: |        |
|  |  |  |  |  |  |  |
| **RECIPIENT** |  |  |  |  |  |  |
| Researcher: |        | Animal facility manager: |        |
| Institution: |        | Phone No.: |        |
| Phone No.: |        | Email: |        |
| Email: |        |   |   |
|  |  |  |  |  |  |  |
| **DELIVERY ADRESS** |  |  |  |  |  |  |
| Contact person: |        | City, Street, No.: |        |
| Email: |        | Country: |        |
| Phone No.: |        | ZIP Code:  |        |
|  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **TRANSPORT INFORMATION** |  |  |  |  |  |  |
| Strain/Transgene/KO: |        | Diet source (if not standard): |        |
| Animal location (barrier/ room): |        | Water source (if not Hydrogel): |        |
| Do the animals carry infectious agents? |        | Invoice data (person, institution): |        |
| Number of animals: |        | **♂** |       | **♀** | Special shipment requirements: |        |
| Animal ID's: |        |   |   |
|  |  |  |  |  |  |  |
| Courier Company |        |
|  |  |  |  |  |  |  |
| **PAYMENT INFORMATION** |  |  |  |  |  |  |
| Invoice account: |        |
| Complete invoice address (incl. street, ZIP code) |        |