TYPE 1 DIABETES GENETICS CONSORTIUM DNA REPOSITORY SHIPPING FORM - FACE SHEET: SHIPMENTS TO CONTRIBUTING INVESTIGATOR

TO: FROM:		
SHIPPING ID LABEL		TYPE OF SAMPLES ENCLOSED:
		(MARK ALL THAT APPLY.)
		DNA 1
		Cell Line 1
COURIER/ SHIPPING COMPANY:		
TRACKING NUM	BER:	
REPOSITORY CO	ONTACT:	PHONE:
		COMPLETED BY DNA REPOSITORY
ID:	1. DNA REPOSITORY	7. REQUEST ID
DATE:		
	Day Month	Year
TIME:	3. SAMPLES PACKED	
1 IIVIC.		
	24-hour clock	
SAMPLES:	MPLES: 4. NUMBER PACKED	
PARTICIPANTS: 5. NUMBER OF UNIQUE IDS IN SHIPMENT		
INITIALS:	NITIALS: 6. PERSON PACKING SAMPLES	
DNA Repository makes 2 photocopies of this original: Original: DNA Repository sends to Coordinating Center.		
Copy #1: DNA F	Repository sends to contributing Repository retains for records.	