

Instructions for the Electronic Material Transfer Information form

1. Place your cursor under the Institution/Company field
2. TYPE in your Institution/Company name.
3. TAB to the next field on the form and type in the required information.
4. Continue using the TAB key to navigate to the next field.
5. Continue to TAB through the rest of the form and complete the required information.
6. You can save the document and email it to info@researchdiets.com or print and **FAX** it to **732-247-2340**.
7. Please use a separate form for each compound.

MATERIAL TRANSFER AND INFORMATION FORM



Please EMAIL this document before shipping and include original copy with your material.

We cannot start production of your diets without this completed form.

To: **Research Diets, Inc.**
 20 Jules Lane
 New Brunswick, NJ 08901 USA
info@researchdiets.com
 Phone: 732-247-2390

Material Return Address

INSTITUTION/COMPANY			Attention to:		
STREET		BUILDING	ROOM #		PHONE NUMBER
CITY	STATE/PROVINCE		ZIP/ POSTAL CODE		EMAIL

Material Information

(Please use a separate form for each material)

MATERIAL NAME	ORIGINAL MANUFACTURER	STORAGE/STABILITY CONDITIONS		
# OF PACKAGES	LOT NUMBER	ROOM TEMPERATURE	LIGHT SENSITIVE	
TOTAL NET WEIGHT	GROSS WEIGHT	4-8 C	HEAT SENSITIVE	
VALUE (USD)	EXPIRATION DATE	-20 C	OTHER:	
COMPOUND PURITY (e.g. 50%, 100%)		SOLID	LIQUID	WATER SOLUBLE
		FINE POWDER	CAPSULE	ALCOHOL SOLUBLE
		GRANULAR	TOTAL #	OTHER:
		TABLET		

How are we to use the material you sent us?

Use it all (maximize quantity of diet)

Only use amount needed for the order (please send us 10% more to account for losses during pelleting)

RDI Contact Name:

Quote # if available:

Any remaining material will be returned to you (at the above Material Return Address) at your cost.

MSDS available? Yes No If yes, please attach. If no, please fill out below:

Handling Instructions/ Special Precautions: (e.g. gloves, mask, etc.)
Health Hazard Data: (Please list any known and potential health concerns)
Other Information:

IF YOU ARE UNSURE ABOUT THE HEALTH CONCERNS OF YOUR MATERIAL, PLEASE DISCUSS THIS WITH US BEFORE SENDING IT, AS IT MAY PREVENT US FROM HANDLING YOUR MATERIAL.

Completed by: NAME _____ TITLE _____ DATE _____