

**OFFICE OF VETERINARY RESOURCES**

**Approved Vendor Animal Order Form**

All animals are virus/specific pathogen free and  
are only received from vendors or institutions with a current health history and sentinel report.

Today's Date: \_\_\_\_\_ Protocol #: \_\_\_\_\_ Facility Location: \_\_\_\_\_

Person issuing this request: \_\_\_\_\_ Phone #: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_ Account # to be charged: \_\_\_\_\_

Signature for Charge Approval: \_\_\_\_\_ OVR must receive an active account number and charge approval, prior to placing orders.

Date Needed	Protocol number and Scientist or student to whom animals will be assigned	Species	Strain	Sex	Days timed pregnant	Age or Weight (gm)	How Many
<b>Total</b>							

<b>Special Instructions:</b>