

**Freimann Life Science Center
Request for Animals
LOBUND-Wistar Rats**

Principal Investigator: _____

Date: _____

IACUC Number: _____

Animal Information

Species: rat _____

Strain: LOBUND-Wistar _____

Number/Sex: _____

Age: weanlings _____

Date needed: _____

Requested by: _____

Phone# _____

Office Use Only

Reviewed by: _____

Requestor notified: _____

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