



**Custom antibody Project modifications, optional extension, termination form (EXT-3 & EXT-4)**

This form can also be sent on-line from the web site ([www.4adi.com/service/ext3form.html](http://www.4adi.com/service/ext3form.html))

**International Projects**, due to shipping constraints, will not be extended unless it is schedule at the initiation of projects. Please contact ADI to arrange for customized project duration.

You were provided with a project ID or Name and scheduled bleed ship dates and expected. All projects will be terminated either on the scheduled termination date or within the next 5-7 working days. We shall attempt to contact you by email/phone. However, it is researchers responsibility to make sure that written instructions are provided for termination and projects extensions. A given protocol, 1 or more animals per projects, can be extended as desired, depending upon the availability of antigens, on a monthly basis only. Extension charges are determined by per diem housing, number of injections and bleeds. For example, one rabbit can be housed for **1 month for just \$150.00 per month per animals** (rabbit, chicken, g. pig, hamster; it includes housing and care, 2 injections, and 2 std. Bleeds).

You can opt to terminate or extend all animals or any given animal (e.g., 1 or rabbits out the 3 per antigen). You will only be charged for the services actually rendered. Animals can be **bled out (\$60/animal)** at any time to collect additional antiserum or simply terminated with no antiserum collection.

**Important:** All project extension/modification requests must be sent in writing by fax or email at least 1 week prior to the scheduled extension.

1. Project name or ID. \_\_\_\_\_
1. Animal #. \_\_\_\_\_
2. Schedule Termination Date \_\_\_\_\_
3. Check the Box  **if no further processing is required** and animals are terminated as scheduled without collecting any bleeds.
4. Optional Extension requested for: \_\_\_\_\_ (# months); \_\_\_\_\_ (specify rabbit #)
5. Optional Extension requested for: \_\_\_\_\_ (# months); \_\_\_\_\_ (specify rabbit #)
6. Optional Extension requested for: \_\_\_\_\_ (# months); \_\_\_\_\_ (specify rabbit #)
7. New Scheduled termination date: \_\_\_\_\_
8. Extension charges @150/animal: \_\_\_\_\_
9. Total Extension Charges: \_\_\_\_\_
10. Bleed out: Collect antiserum upon termination (\$60/animal; ~50-60 ml serum/rabbit:  
\_\_\_\_\_
11. TOTAL CHARGES: \_\_\_\_\_
12. New PO#: \_\_\_\_\_. Note: Most institutions will not allow new charges to be added on an existing PO#, and also refuse to accept shipments if a PO# has already been invoiced and paid. ADI will NOT ship anything until a new PO# is provided. It is the responsibility of the researchers to provide us with applicable PO#.

Date: \_\_\_\_\_; Name: \_\_\_\_\_; Signature: \_\_\_\_\_

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**ADI Office Use only**

Date: \_\_\_\_\_ Invoice # \_\_\_\_\_ Total Charges \_\_\_\_\_