



**Rickettsial Zoonoses Branch Laboratories**  
**CRIRC Isolate or DNA Request Form**

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**CRIRC** WDCM 1093  
Centers for Disease Control and Prevention  
Rickettsial Isolate Reference Collection

**Isolate or DNA Request Form**

**Requester information**

Name:

Institution:

Phone number:

Email address:

Complete shipping address:

**Material requested**

What are you requesting?   DNA                      Isolate

Specify desired genus and species (strain, if known):

Special consideration for strain selection, if any (ex: type strain, source, geographical origin):

Proposed use of Isolate/DNA:

**For CRIRC Use Only**

Date form received:

MTA/SLA #:

SCIRESON shipping #:

FedEx tracking #:

Date shipped:

Delivery confirmation: Yes      No      Date received: