Note: Prepare a separate shipping manifest for each package. Place each shipping manifest (with specimen identification numbers) in a plastic zippered bag on top of the specimens before closing the lid of the polystyrene foam-insulated, corrugated fiberboard shipper.

Date Shipped: ______________________________  Date Received: ______________________________

Shipped By: _______________________________  Received By: _______________________________

________________________________________  Signature: _________________________________

Contact Telephone: _________________________

Signature: _________________________________

URINE

Total Number of Specimens in this Container:____  Total Number of Blank Urine Cups this Container:____

Please include two (2) empty, unopened urine cups from each lot number collected for background contamination measurement.

COMMENTS: _____________________________________________________________________________
________________________________________________________________________________________
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CONTINUE ON NEXT PAGE

SHIPPING ADDRESS: Centers for Disease Control and Prevention
Attention: Sample Logistics
4770 Buford Hwy., NE
Building 110, Loading Dock
Atlanta, GA 30341
Phone: 770-488-7227
CONTINUED FROM PREVIOUS PAGE

PLEASE INDICATE THE AMOUNT OF URINE COLLECTED IN THE URINE CUP (UC) COLUMN.

<table>
<thead>
<tr>
<th>Patient/Victim ID Label</th>
<th>UC (Amount)</th>
<th>Comments</th>
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NOTE: Please include two (2) empty, unopened urine cups from each lot number collected for background contamination measurement.