

Shipment Form and Invoice Clinical Isolate for FungiThek

Thank you for providing us with information about the species prior to shipment. Please send information to fungiscope@uk-koeln.de

Please send isolate to: University Hospital Cologne
Studienzentrum Infektiologie
z.Hd. Andrea Will - FungiScope
Herderstrasse 52-54
50931 Cologne
Germany

Date:



Contact Provider

Name: _____

Address: _____

Tel-Nr: _____

Email: _____

Clinical Specimen

Fungiscope-ID: _____

Presumed or definite species: _____

Type of material: _____

Site of origin: _____

Date material was obtained: _____

Details for Payment (50 Euro/Specimen)

You may use our FedEx Account. Please contact us at fungiscope@uk-koeln.de to receive the account no. If you send the isolate on your own expenses, we will reimburse for the shipment. Please provide the following information:

Number of specimens: _____ Total amount: _____ Euro

Name of bank: _____

Account holder: _____

SWIFT-Code: _____

IBAN: _____

Thank you for your contribution to Fungiscope!