

International Depository Authority of Canada

National Microbiology Laboratory, Public Health Agency of Canada

1015 Arlington Street

Winnipeg, Manitoba Canada R3E 3R2

Tel: (204) 789-6030

Fax:(204) 789-2018

Form IDAC/BP/13

REQUEST FOR SAMPLE AFTER ACCESSION NUMBER PUBLICATION

(pursuant to Rule 11.3(b) of the *Budapest Treaty* Regulations)

The undersigned hereby requests a sample of the deposit identified below, the accession number of which has been communicated from the IPO as being the subject matter of a patent. The undersigned declares that it will not use the sample in such a way as to infringe on any patent relating to the deposit.

Accession Number of Deposit: _____

Name of depositor (if known): _____

Identification given by depositor (if known): _____

Taxonomic designation or scientific description proposed by depositor (if known) _____

The undersigned requests information pertaining to the conditions of storage and cultivation of the deposit employed by IDAC.

Yes No

Requesting Party

Name of requesting party _____

Address _____

Signature

Date _____