

Loughborough University		Authorisation to Acquire or Transfer HTA Licensable Material		
The Centre for Biological Engineering				
Doc Ref: HTA-PR-FORM/011M	Version N ^o :	1.0	Issue Date:	07.12.18

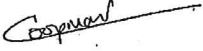
AAT No: CBE/AAT/000 22	<input checked="" type="checkbox"/> Incoming material <input type="checkbox"/> Outgoing material
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To be completed by the Principal Investigator or Person Responsible for the acquisition or transfer of HTA licensable material

Name: Maryam Shariatzadeh	Role: Post doctoral research associate		
Contact Details: Tel: 01509 227690 Email: m.m.shariatzadeh@lboro.ac.uk	Department: Centre for Biological Engineering		
Research Project Reference:	J13772		
Research Project Title:	Mechanistic Modelling for T Cell Therapy Manufacture		
Material Transfer Agreement Ref Number:	N/A		
Biological Risk Assessment Ref Number	154		
Supplier Organisation (as applicable):	Address: Human Biospecimens and Drug Discovery Services Cambridge Bioscience Limited Munro House Trafalgar Way, Bar Hill Cambridge CB23 8SQ United Kingdom Tel: +44 (0)1223 316855 x 255 Email: vashu.pamnani@bioscience.co.uk Website: www.bioscience.co.uk	Country: UK	
If material is imported (from outside England, Wales and Northern Ireland) provide a brief statement of justification	N/A		
Destination Organisation (as applicable):	Address: N/A	Country: N/A	
Type/ID of material: (eg primary cell, cell line, tissue, body fluid, excreta, biological agent)	Frozen PBMC aliquots		
Format / Quantity: (eg number of vials, slides, etc)	8* cryotubes		
Transport conditions:	Dry ice		
Fate of material following project completion:	<input type="checkbox"/> Return to provider <input type="checkbox"/> Transfer to another organisation	<input checked="" type="checkbox"/> Retain <input type="checkbox"/> Dispose	
Proposed date of receipt or transfer	20/12/18		

Authorisation for acquisition or transfer:

Principal Investigator (PI) or Person Responsible:	Name:	Signature:	Date:
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Departmental Person Designate (dPD)	Name:	Signature:	Date:
Designated Individual(DI) or Deputy DI or University PD <i>(only required if the dPD is also the PI or dPD is unavailable)</i>	Name: Karen Coopman	Signature: 	Date: 11/12/2018