



# Shipment Alert Form

Please fill out this form each time you ship a specimen and either fax it to 503-459-4976 or email it to [shipping@molecularmd.com](mailto:shipping@molecularmd.com).

Sender: \_\_\_\_\_

Phone number/email address: \_\_\_\_\_

Number of samples sent: \_\_\_\_\_

Date shipped: \_\_\_\_\_

Courier used: \_\_\_\_\_

Tracking number: \_\_\_\_\_

