INSTRUCTIONS FOR RECIPIENTS OF BAYLOR COLLEGE OF MEDICINE MATERIAL

Baylor College of Medicine Material Transfer Agreement for Biological Material
For Academic and Non-Profit Entities (including Governmental Agencies)

Please read these instructions carefully and verify that all requested information and signatures have been obtained. Improper signatures or incomplete information will delay your request.

1. Read this entire form and provide the necessary information where requested on all pages of the form.

2. Have this form signed and dated by the Recipient Scientist. Please note that this must be someone of Principal Investigator status (i.e., not a student or post-doc) who will be responsible for ensuring that the material is used according to the terms of this agreement.

3. Have this form signed and dated on behalf of the Recipient Scientist’s Institution. Please note that this must be done by someone with signatory authority, usually by officials in the Institution's Technology Transfer Office or Office of Sponsored Research.

4. Email or fax one signed document to the Provider Scientist to complete the signature process. If your institution requires original hard copies, please mail 2 signed originals to the Provider Scientist. Provider Scientist will email or fax the signed agreement to Baylor College of Medicine – Office of Research.

Provider Scientist: Jin Wang
Email: wangj@bcm.edu
Fax: 713-798-3145
Address:
1 Baylor Plaza
Houston, TX 77030
U.S.A

5. Baylor College of Medicine’s Office of Research will notify the Provider Scientist that the material may be released once the properly completed and signed agreement is received.

6. Please direct any questions to Baylor College of Medicine’s Office of Research.

Phone: 713-798-6821
E-mail: mta@bcm.edu
Fax: 713 798-1252
UBMTA Implementing Letter

The purpose of this letter is to provide a record of the biological material transfer, to memorialize the agreement between the PROVIDER SCIENTIST (identified below) and the RECIPIENT SCIENTIST (identified below) to abide by all terms and conditions of the Uniform Biological Material Transfer Agreement (“UBMTA”) March 8, 1995, and to certify that the RECIPIENT (identified below) organization has accepted and signed an unmodified copy of the UBMTA. The RECIPIENT organization's Authorized Official also will sign this letter if the RECIPIENT SCIENTIST is not authorized to certify on behalf of the RECIPIENT organization. The RECIPIENT SCIENTIST (and the Authorized Official of RECIPIENT, if necessary) should sign both copies of this letter and return one signed copy to the PROVIDER. The PROVIDER SCIENTIST will forward the material to the RECIPIENT SCIENTIST upon receipt of the signed copy from the RECIPIENT organization.

Please fill in all of the blank lines below:

1. PROVIDER: Organization providing the ORIGINAL MATERIAL:
   
   Organization: Baylor College of Medicine  
   Address: One Baylor Plaza  
   Houston, TX 77030-3411  
   Email: mta@bcm.edu

2. RECIPIENT: Organization receiving the ORIGINAL MATERIAL:
   
   Organization:

   Address:

3. ORIGINAL MATERIAL (Enter description):
   
   RealThiol, a fluorescent probe for glutathione imaging in living cells

   Organelle-specific versions of RealThiol glutathione probes

4. Termination date for this letter (optional):

5. Transmittal Fee to reimburse the PROVIDER for preparation and distribution costs (optional). Amount:_________________.

BLG – 1/2/2015
This Implementing Letter is effective when signed by all parties. The parties executing this Implementing Letter certify that their respective organizations have accepted and signed an unmodified copy of the UBMTA, and further agree to be bound by its terms, for the transfer specified above.

**BAYLOR COLLEGE OF MEDICINE**

**AUTHORIZED SIGNATORY:**

Signature:

____________________________
Michael Dilling
Director, Baylor Licensing Group

Date

**RECIPIENT**

**AUTHORIZED SIGNATORY:**

Signature:

____________________________
Recipient Official

Name

Title

Date

**PROVIDER SCIENTIST:**

Signature:

____________________________
Jin Wang
Name

Date

**RECIPIENT SCIENTIST:**

Signature:

____________________________

Name

Date

Questions regarding this Agreement shall be referred to:
Baylor Licensing Group
Baylor College of Medicine
One Baylor Plaza, M/S BCM 210
Houston, TX 77030
713 798-6821 phone
713 798-1252 fax
mta@bcm.edu

Address where Materials should be shipped:

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