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9. The MATERIAL is provided at no cost, or with an optional transmittal fee solely to reimburse the NCI for its preparation and distribution costs.

**NCI INFORMATION and AUTHORIZED SIGNATURE**

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Signature of Authorized Official: \_\_\_\_\_ Date: \_\_\_\_\_

**RECIPIENT INFORMATION and AUTHORIZED SIGNATURE**

Recipient Scientist:  
Recipient Organization:  
Address:  
Print Name of Authorized Official:  
Title of Authorized Official:

Signature of Authorized Official: \_\_\_\_\_ Date: \_\_\_\_\_

Certification of Recipient Scientist: I have read and understood the conditions outlined in this Agreement.

Signature of Recipient Scientist: \_\_\_\_\_ Date: \_\_\_\_\_