This request is for site:

- Seke South (Chitungwiza)
- Zengeza (Chitungwiza)
- Spilhaus (Harare)
- Makerere Univ.–JHU (Kampala)

Requested by:

Printed name: ____________________  E-mail: ____________________

Instructions: Request forms at least 3 weeks in advance of needing them at your site to ensure a steady supply of participant forms. To request additional forms for the MTN 003B Protocol, please complete this form and fax to DataFax. Fax only one request per day. Record the quantity of each item in the specific language you need. Order minimum quantities of 100 of each item.

<table>
<thead>
<tr>
<th>MTN 003B VISIT PACKET/CRF</th>
<th>Acronym</th>
<th>LANGUAGE</th>
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<tbody>
<tr>
<td></td>
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<td>ENGLISH</td>
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<td>LUGANDA</td>
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<td>SHONA</td>
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MTN 003B Visit Packets (All packets include only English CRFs.)

- Screening and Enrollment Visit: N/A
- Follow-up Visit: N/A

MTN 003B Local Language Packet

- Local Language Packet (Includes Physical Activity Questionnaire and Food Frequency Questionnaire in language specified)

MTN 003B CRFs

- MTN 003B Eligibility: ELB-1
- MTN 003B Lactation and Contraceptive History: LCH-1
- MTN 003B Visit Procedures: VP-1
- MTN 003B DXA Scan: DXA-1
- MTN 003B Early Termination: TMB-1
- MTN 003B Missed Visit: MVB-1
- MTN 003B LDMS Specimen Tracking Sheet: non-DataFax
- MTN 003B CRF Request Form (1 pg): N/A

Blank Specimen Labels

Number of Sheets: Mark only one for each type of label.

- Large (0.5" x 1.25")
  - 100
  - 200
  - 300

For questions regarding your CRF Order, please send an e-mail to sc.crforders@scharp.org or contact your study Project Manager.

18-JUN-09