

VIAL BUYBACK REQUEST FORM

Eligibility Requirements for the Vial Buyback Offer:

- Vial(s) must have been purchased and stored at a California Cryobank facility.
- Vial(s) are only eligible for the Buyback Offer if the vial(s) have not been shipped or picked up from a California Cryobank facility.
- Vial(s) must be sold back to California Cryobank within 36 months of purchase date.
- Vial(s) must meet California Cryobank's current donor testing standards.
- Vial(s) must be sold back by the original purchaser.
- Any outstanding account balance due from client will be deducted from Vial Buyback credit.
- Offer invalid if CCB discontinues selling vials to retail customers.

Client Information:

Name: _____

Account Number: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone Number: _____ E-Mail Address: _____

Client Request:

I authorize California Cryobank to remove the following vial(s) from my storage account for the Vial Buyback Offer:

Donor number: _____ ICI IUI Premium ART Quantity of vials: _____

I understand:

- I will receive 50% of the original purchase price if vial(s) meet Vial Buyback requirements, less any outstanding balance due, via check.
- Storage account fees will not be refunded or pro-rated.
- Processing will take approximately 4 weeks.
- Notification will be sent to me via e-mail upon completion.
- Vial Buyback Offer eligibility is subject to review and approval by California Cryobank management.

Client Signature: _____ Date: _____

Reason for Buyback

Reached Family Goal Discontinuing Process Financial Other: _____

Send completed request form to: **California Cryobank**
 11915 La Grange Ave
 Los Angeles, CA 90025
 Fax: 866-625-7336
 Telephone: (866) 927-9622 or (310) 443-5244