ONLINE FFQ PROCESSING FORM

IF YOU HAVE FORMATTED YOUR QUESTIONNAIRE INTO A COMMA DELIMITED (CSV) DATA SET TO MATCH A HARVARD FFQ DATA DICTIONARY, WE REQUEST THAT THIS FORM BE SUBMITTED WITH **EACH** REQUEST TO ANALYZE YOUR QUESTIONNAIRE. (DO NOT SEND THE ORDER FORMS TO BRISTIAN JUSTICE.)

(Please make copies for use with each submission).

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| Investigator’s Name:Hypothesis:Email Address (**Required for WINZIP Attachment – provide 2 addresses)**:WINZIP file is sent using Partner’s Secure Transfer. **You must login in and pick up your data within 10 days**.If your institution will not receive zipped data files, please provide a home-based PC email address. In what year did your participants complete the questionnaire? |

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| Billing Name:Billing Address:Tax Exempt Number: Purchase order number: Is your study funded by federal grant? \_\_\_Yes \_\_\_NoPhone Number:Email Address:How will you likely pay your invoice? Wire transfer is preferred for orders over $1000.00Check\_\_\_  Wire Transfer\_\_\_ Date of Transfer\_\_\_\_\_\_\_\_ (email Bristian Justice: bjustice@hsph.harvard.edu for wire info)Harvard Internal Payment\_\_\_\_ (Harvard Affiliated Only. email Bristian Justice: bjustice@hsph.harvard.edufor account string)**\*\*NOTE: All payments MUST have an identifier in the memo;** **NQSC (Invoice #);B.Justice 2-7866.** |

 We accept payments by check, wire transfer, or Harvard Internal Payment (Harvard Affiliates only).

 Credit cards are not accepted. Contact Bristian Justice at 617-432-7866 or bjustice@hsph.harvard.edu for information if paying

 by wire or internal transfer. For billing questions please contact Lauren Dougherty at 617-998-6615 or by email at

 lwolfert@hsph.harvard.edu**. \*\*Please do not send the Order form for order requests to Bristian Justice.**

Please make checks payable to Harvard University.

 DO NOT USE W9 Address as mailing address

**SEND PAYMENT to:**

**Harvard T.H. Chan School of Public Health**

**ATTN Bristian Justice**

**Nutrition Department-Finance**

**Bldg.2, 3rd floor**

**665 Huntington Ave.**

**Boston, MA 02115**

 MEMO: **NQSC (Invoice #);B.Justice 2-7866**

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| SUBMITTING REQUEST FOR NUTRIENT ANALYSISNumber of data sets attached:Please circle the format you would like to receive: **EXCEL ASCII**  Please provide the filename(s) of submitted data:

|  |  |
| --- | --- |
|  |  Rate per Batch |
|  |
| FILENAME: | $10.00 per record |

**TWO** Email Addresses for Data Return: |

List variables to be analyzed: