(Form C-0032)

# ORDER FORM

Animal ES cell lines including nuclear transferred ES cell lines and germline stem cell lines (AES)

Date:

To: Dr. Yukio Nakamura, Head, Cell Bank Riken BioResource Research Center

## **RECIPIENT / SHIP TO:**

Name:	Job	o Title:
Telephone Nu	umber:	E-mail:
Department/D	Division:	
Organization:		
Organization	Type (Please check or * Non- Profit	fit 🗆 For-Profit 🗆
Address:	Country:	EORI Number:

#### PLEASE CHECK ONE

- \* **Payment:** D Bank Transfer Credit Card Payment
- \* Carrier: 🗆 FedEx (Account No.
  - □ Others (

), 🗆 World Courier

)

We strongly recommend the transport companies that deal the custom procedure properly. The RIKEN BRC shall have no liability for any consequences arising from the custom procedure on the side of the RECIPIENT's country.

### REQUESTED BIOLOGICAL RESOURCE

AES No.	Cell Line Name	Qty (Frozen only)

#### **IMPORTANT NOTES**

\* Please make MTA (Form C-0007) for each material.

\*\* If Approver's permission is required, APPROVAL FORM (Form C-0006) must be accompanied.

BILLING ADDRESS (If the billing address is different from the Recipient, Please fill out the below.)

Purchase Order #:(If you have)	VAT #: (If you have)
Name:	E-mail:
Telephone Number:	Fax Number:
Department/Division:	
Organization:	
Address:	Country:

- (Reception Date
- (User No.

) (Reception No. ) (MTA No. )

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