

## Biology Stockroom NEB Order Form

Date: \_\_\_\_\_

Lab: \_\_\_\_\_

Requester's Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

	Catalog Number:	Description:	Quantity:
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

Note: Please pick up all ordered enzymes within one week of arrival. After one week, the PI will be charged whether it is picked up or not. No returns are available for any NEB enzyme order.

\_\_\_\_\_ Initial here to certify you have read this form, provided the correct information for your order, and approve the order as it has been sent.