# Order Sheet

## Corporation Only

Fill this order sheet out, fax it to us on **+81-3-3968-4863**

or e-mail us at **obs-p@nisshin.com**

**Oriental BioService, Inc. (OBS)**

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| Customer Information |
| 1. Institution Name, Address and Telephone and Fax Numbers

Institution Name:      Mailing Address:     City:    State:      Zip or Postal Code:     Country:      Telephone (please include your country code):   Fax (please include your country code):     |
| 1. Your Name, Position and Title

      |
| 1. Your Telephone and Fax Numbers and E-mail Address

Phone:      Fax:      E-mail :   |
| 1. Designation Please circle a line or lines listed below that you are requesting.

[ ] 1 line / 100embryos(2-cell) \* C57BL/6 Background only |
| 1. Total Number of Lines Please Note: Each line requires payment of a separate fee.

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| 1. Research Purpose

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|  **L**eave **B**lank **– OBS Use Only** Date Received  No.  Total Fees  |

*\* Oriental BioService, Inc. is licensed by bailor to breed and distribute the Hrh1 knockout mice. You shall be responsible for complying with the terms and conditions as set forth in the Material Transfer Agreement entered by Oriental BioService, Inc. and your institution.*