

EZBiolab siRNA Synthesis Order Form

Fax: 317-663-0721 Email: service@ezbiolab.com

Date _____

Mailing address:
 Name _____
 Institution _____
 Department _____
 Address _____

 City _____
 State, Zip _____
 Email _____
 Phone _____
Billing Information:
 P. O. # _____
 Name _____
 Institution _____
 Department _____
 Address _____

 City _____
 State, Zip _____
 Phone _____

For credit card payment: Visa Master AE

Card # _____ Card Holder Name _____

Expiration date _____ Signature _____ Date _____

siRNA	name	amount (nmol)	sequence (19 bp)	price (\$)
1			5'-_____dTdT-3'	
2			5'-_____dTdT-3'	
3			5'-_____dTdT-3'	
4			5'-_____dTdT-3'	
5			5'-_____dTdT-3'	
6			5'-_____dTdT-3'	

Number of siRNAs: ____ **Cost: \$** _____ **Shipping: \$** _____ **Total Order: \$** _____
Comment:

Price information:	<u>20 nmol \$295.00</u>	Shipping: \$30.00/(1-4 siRNA) All siRNAs are PAGE purified and pre-annealed
	<u>40 nmol \$395.00</u>	
	<u>100 nmol \$765.00</u>	