- 1. Complete all sections of Oligonucleotide Order Form
- 2. Print 1 copy for your records & drop or email 1 copy to order@acgtcorp.com



Oligonucleotide Order Form						
Shipping Information:	Billing Information:	\square same as shipping information				
Date:	Quote No.					
Name*:	Name:					
Institution*:	Institution:					
Ship Address*:	Bill Address:					
	<u> </u>					
Phone*:	Phone:					
Email*:	Email:					
OFFIC	CE USE: PAYMENT INFORMATION Credit Card Information on file					
PO Number:						
C.C Type:	C.C. Name:					
C.C Number:	C.C. Exp. Date:					

Notes:

[■] Enter oligo sequence from 5' to 3'

						Office Use			
Primer Name (max 20 characters)	QTY	Oligonucleotide Sequence $(5' \rightarrow 3')$	Synthesis Scale ¹ (µmole)	GMP ² (Y/N)	Modification	Final Delivery Form ³	Purification ⁴	Oligo ID	Shipped

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Primer Name (max 20 characters)	QTY	Oligonucleotide Sequence (5' → 3')	Synthesis Scale ¹ (µmole)	GMP ² (Y/N)	Modification	Final Delivery Form ³	Purification ⁴	Oligo ID	Shipped
							D. 1. 1(DG)		

or 0.2 or 1.0 µmole

Additional Notes:

^{1:} Synthesis Scale: 0.02 or 0.04 2: Manufactured under a Quality System designed to meet the requirements 3: Final Form Delivery: Liquid or Dry Powder of ISO 13485:2003. Additional charges may apply.

^{4:} Purification: Desalted (DS) or RP-Cartridge (RPC) or PAGE or HPLC