ORDER REQUEST FORM

**For:** Dr. Tony Kong **Ext:** 445-0128 **Date:** May 24, 2016

**Order type:**

 **Purchase Requisition (****R,**  **Q,**  **I)**

 **Reimbursement (billhead, travel & business expense, petty cash)**

* **Other:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Supplier:** | SIGMA | **Attn:** | Davit Sargsyan  732-766-5449 |
| **Address:** |  | **Billing address:** | Rutgers Univ  Disbursement Control, Rm. 302  65 Davidson Rd.  Piscataway, NJ 08854 |
| **Phone:** | 1-877-374-4368 | **Ref #:** |  |
| **Fax:** | 1-800-962-9591 | **Quotation Date:** |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Quantity | **Item Number** |  | **Description, Size** |  |  | **Unit cost** |  | **Total cost** |
| 1 | D7802-25MG |  | **Daidzein (D7802 SIGMA)**  **≥98%, synthetic** |  |  | **$93.40** |  | **$93.40** |
| **1** | **G6649-25MG** |  | **Genistein (G6649 SIGMA)**  **synthetic, ≥98% (HPLC), powder** |  |  | **$102.50** |  | **$102.50** |
|  |  |  |  |  |  | Total |  | $195.90 |

Account #: 49457280

Account Name: Pharmaceutics

Radioactivity: No

RUSH:

**CONFIRMING ORDER**

**PO Number**:

**Fund Approval # (for orders over $1000):**

**Reference #:**

**Expenditure Approval**:

A.-N. Tony Kong