

## **DEMO REQUEST FORM**

REAGENTS & MACHINES

SALES DEPARTMENT

		REQUE	STOR INFORMATI	ON							
NAME:				С	DATE OF REQUEST:						
POSITION:				1 -	PREFERRED DEMO DATE(S):						
DEPARTMENT:				Р	PURPOSE OF DEMO:						
CONTACT INFORMATION:		ADDI	RESS:		<u>'</u>						
REAGENTS INFORMATION											
NAME OF REAGENTS					CONSUMABLES						
		MACH	INE INFORMATIO		IONS /						
MACHINE NAME:	REQUIRED SPE FEATURES:										
PURPOSE OF DEMO:	SPECIAL REC			REMEN	TS: (e.g., installation needs)						
		OAPPROVED	ODISAPPROVE	:D	OAPPROVED ODISAPPROVED						
<b>Requestor Signature</b> Date: Signature over Printed Name		<b>Immediate Superior</b> Date: Signature over Printed Name			KATHLEEN REYES, MHM, DBA Chief Operating Officer						
BMI-FORM-SLS-001		*Don't forg	get to attach relevant refere	nces*							



## **DEMO REQUEST FORM**

**REAGENTS & MACHINES** 

SALES DEPARTMENT

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		REQUE	STOR II	NFORMATIO	N							
NAME:					DATE (	OF REQUEST:						
POSITION:					PREFEF DATE(S	RRED DEMO						
DEPARTMENT:					PURPO	SE OF DEMO:						
CONTACT INFORMATION:		ADDI	RESS:		·							
REAGENTS INFORMATION												
NAME OF REAGENTS					CONSUMABLES							
MACHINE INFORMATION												
MACHINE NAME:				REQUIRED SPECIFICATIONS/ FEATURES:								
PURPOSE OF DEMO:				IAL REQUIRE	(e.g., installation needs)							
		OAPPROVED	<b>○</b> □	ISAPPROVED		OAPPROVE	D	ODISAPPROVED				
Requestor Signature Date: Signature over Printed Name		<b>Immediat</b> Signature ove	Immediate Superior Signature over Printed Name			KATHLEEN REYES, MHM, DBA Chief Operating Officer						
BMI-FORM-SLS-001		*Don't forg	es*		•	<del>-</del>						