

SAMPLES/DEMO REQUEST

SALES DEPARTMENT

TYPE OF ACCOUNT:	PRIVATE	GOVERNMEN	T DEALER IT	EM REQUEST:	REAGEN	TS CON	ISUMABLES M	IACHINES	
REQUESTOR INFORMATION									
EMPLOYEE NAME					DATE OF REQUEST				
DEPARTMENT					POSITION				
ACCOUNT NAME					PREFERRED DEMO DATE(S)				
ADDRESS					CONTACT NUMBER OF ACCOUNT				
PURPOSE OF DEMO	ю								
REAGENTS AND CONSUMABLES INFOR									
PART NO.		DESC	CRIPTION		QTY	UNIT	UNIT COST	TOTAL AMOUNT	
							GRAND TOTAL		
MACHINE INFORMATION (TO BE FILLED BY TECHNICAL SERVICE DEPARTM							T)		
MACHINE NAME M.					IACHINE SERIAL NO				
ACCESSORIES NEEDED				(e.g., installation	SPECIAL REQUIREMENTS (e.g., installation needs)				
					CHECKED BY				
				_					
DATE					Signature over Printed Name GNED:				
PREPARED BY END			ENDORSED BY			APPROVED BY			
Employee's Signature Product Manager/Pro				luct Application Manager r Printed Name)		STEPHEN C. HERNANDEZ National Sales Director			
(Signature over Printed Name) DATE SIGNED:			(Signature over DATE SIGNED:		DATE SIGNED:				