5518 NICHOLSON LANE SUITE 400. KENSINGTON, MARYLAND 20895

INVOICE

PLEASE SEND PAYMENT TO:

INVOICE NO.: 708523

HAZLETON LABORATORIES AMERICA, INC.

USE THIS NUMBER FOR CHECK REMITTANCE

PO BOX 25065 RICHMOND, VA 23260 USA

AND CORRESPONDENCE

BILLED TO:

DATE: 02-03-87

DR. J. D. HECK LORILLARD RESEARCH CENTER 420 ENGLISH STREET P.O. BOX 21688 GREENSBORO, NC 27420

SPONSOR REFERENCE:

DATE OF AUTHORIZATION: 09-23-86----

IDENTIFICATION:

(PURCHASE ORDER NO. 343D

HLA REFERENCE:

PROJECT AUTHORIZATION NO.: 0862

COST CENTER:

6130 20988

PROJECT NUMBER:

SERVICES RENDERED: SALMONELLA TYPHIMURIUM REVERSE MUTATION ASSAY

IN TRIPLICATE

FINAL REPORT

ASSAY/PROT TEST MATERIAL

9519 0 401 B206

01-20-87

1,250

TOTAL AMOUNT DUE UPON RECEIPT: