

Order Form

Shipping Information			
Facility Name:			
Shipping Contact Name:			
Date of Case (MM/DD/YY):	Product Arrival Date (M	M/DD/YY):	
Shipping Address:			
City:	State:	Zip:	
Phone:	Fax:		
Email:			

Billing Information			
Facility Name:			
Billing (Accounts Payable) Contact Name:			
Billing Address:			
City:	State:	Zip:	
Phone:	Fax:		
Email:			

Order Informa	ation					
Product Code	Description	Size	Storage Temperature	Price Per Ea.	Qty	Total
XWO-60202	XWRAP°	2x2cm	Ambient			
XWO-60204	XWRAP°	2x4 cm	Ambient			
XWO-60404	XWRAP°	4x4 cm	Ambient			
XWO-60406	XWRAP°	4x6 cm	Ambient			
XWO-60408	XWRAP°	4x8 cm	Ambient			

PO Number Total Value

Terms: This order shall be deemed a final order without need for any additional purchase order. Barring any other written warranties or agreements with BiowerX, this order shall be a direct purchase of product with 60 day net terms from delivery. Orders for XWrap are payable to Applied Biologics. You will be invoiced directly by Applied Biologics.