

LABORATORY EQUIPMENT ORDER FORM

 **Date:** …………………

* **Your name:** ……………………………………………………………………………………………………………………………….
* **Your SDU e-mail address:** ………………………………………………………………………………………………………….
* **Research group:** ……………………………………… **Account:** ………………………………………………………

Information regarding the laboratory equipment

* **Product name:** …………………………………………………………………………………………………………………………..
* **Vendor:** ……………………………………………………………………………………………………………………………………..
* **Catalogue number:** ……………………………………………………………………………………………………………………
* **Package size:** ………………………………………..
* **Amount:** ………………………………………………. **Price:** …………………………………………………………..
* **Database number:** (for FKF-indkoeb use only)………………………………….……………………………………………..
* **Instructor attest:** ……………………………………………………………………………………………………………………….