

Orderform PASH Standards

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Phone: ++49-251-83-33141; Fax:++49-251-83-36013 Date: _____

Sender

Company: _____

Street: _____

Zip Code/City: _____

Country: _____

Phone: _____

Fax: _____

No.	CAS-No.	No. of Ampouls	Name of Standard	Net Amount (Euro)
1				
2				

3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
			Sum:	
			___ % Discount:	
Express Delivery? yes no			Total Net Amount:	

Stamp /Signature
