COMMONWEALTH BIOTECHNOLOGIES, INC.

601 Biotech Drive, Richmond, VA 23235
Phone: 1-800-735-9224/804-648-3820
Fax: 804-915-3834
Website: www.cbi-biotech.com
E-mail: info@cbi-biotech.com

MASS SPECTROMETRY ORDER FORM

CLIENT SHIPPING INFORMATION	CLIENT BILLING INFORMATION
Contact Name: _____	**Company Name:** _____
Company Name: _____	**Bill to Address:** _____
Ship to Address: _____	_____
_____	_____
_____	**Phone:** _____
Phone: _____	**Fax:** _____
Fax: _____	**PO# or Credit Card Information:** _____
Email: _____	_____
_____	_____

Please indicate below the level of testing required (We would be pleased to clarify the levels of testing at your request): ☐ **R & D Request** ☐ **GLP Request** ☐ **cGMP Request**

Experiment(s) To Be Done:

☐ MALDI-TOF ☐ ES/MS ☐ LC/ES/MS ☐ NS/MS ☐ GC/MS

Sample ID: _____

Amount Supplied: _____ mgs _____ pmoles @ 100% by weight

Estimated Molecular Weight: _____

Nature of Sample:
Is the sample (please select all that apply):

☐ Isolated material ☐ Synthetic product ☐ Biological hazard ☐ Radioactive

Known salt present (please select all that apply):

☐ Guanidine ☐ SDS ☐ Acetate ☐ TFA ☐ Other salt additives: _____

Solvent composition (if applicable): _____

Other Information/Requirements: _____

_____

_____

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SERVICE AGREEMENT

Service:
Commonwealth Biotechnologies, Inc. (CBI) endeavors to provide timely, quality service, with rapid return of analytical results and/or samples to the Client (the Investigator requesting services to be performed). CBI will promptly notify the Client of any unexpected delays. CBI personnel will follow applicable written protocols for all services provided. CBI will provide proof of accepted analytical techniques, as requested by the Client. CBI will provide data and/or summary sheets of all results obtained.

Payment:
In exchange, the Client agrees to pay in full, for the services delivered to client in full within 30 days of receiving CBI's invoice for the services performed. CBI makes no expressed or implied warranties for the results that are obtained and unless there is an instrument malfunction, a technician error, or some fault directly attributable to CBI. ***PAYMENT IN FULL IS EXPECTED UNLESS PREVIOUS ARRANGEMENTS ARE MADE WITH CBI.*** CBI will not be held liable for results obtained with Clients samples. CBI expressly guarantees to perform all its procedures with professional diligence, and strives to perform quality work acceptable to all its Clients.

Date of this Agreement: _____

_____RBH:vt_____

Robert B. Harris, Ph.D.
President
Commonwealth Biotechnologies, Inc.
601 Biotech Drive
Richmond, VA 23235

Client Signature: _____

Client Name: _____

Title: _____

Company Affiliation: _____