

# Order Form for Human Cell Line Authentication

E-mail to [service@clsgmbh.de](mailto:service@clsgmbh.de) or Fax to +49 (0)6221 700717



No.	Sample Name of cell line	Risk Level (BSL)	For samples sent as genomic DNA		For samples sent as cell pellet
			conc. [ng/μl]	OD 260nm/280nm	(cells/ml)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

The results will be provided by e-mail, please note your address:

<b>Delivery Address</b>			Your Purchase order no.:	
Recipient's Name:		Phone:		
Company / Institution:		FAX:		
			<b>E-mail:</b>	
Street:				
City		ZIP Postal code		
Country		State / Province		

<b>Billing address</b>			CLS Customer Account no.	
Company / Institution:				
Street:				
City		ZIP Postal code		
Country		State / Province		
<b>VAT number (EU-states only)</b>				
Category of Organisation				

We operate exclusively based on our General Terms and Conditions.

<b>Date:</b>	<b>Name of signee:</b>	<b>Signature:</b>

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VAT no.: DE283292917  
 Tax ID: 32491 / 68551  
 Amtsgericht Mannheim HRB 714394  
 Manager: Dr.rer.nat. Rosemarie Steubing

Bank: Sparkasse Heidelberg  
 IBAN:DE35672500200009207686  
 BIC: SOLADES1HDB  
 E-Mail: [info@clsgmbh.de](mailto:info@clsgmbh.de)  
<https://www.clsgmbh.de>