

**ORDER FORM****OMICRON BIOCHEMICALS, INC.**

Phone: 574-287-6910

Fax: 574-287-7165

115 South Hill Street

South Bend, IN 46617-2701 USA

Contact Name: \_\_\_\_\_

Date: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Fax: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

Billing Address (N/A for credit cards): \_\_\_\_\_

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FedEx Account Number: \_\_\_\_\_

If not provided, shipping and insurance fees will be added to the product invoice.

USA orders please indicate one or two day shipping preference: \_\_\_\_\_

**Payment Options:**

Please enter Purchase Order Number or Credit Card Information.

Purchase Order: \_\_\_\_\_

 Visa Mastercard

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Security Code (last 3 digits on card back): \_\_\_\_\_

Name on Card: \_\_\_\_\_

Address to which card statement is mailed:

\_\_\_\_\_

\_\_\_\_\_

Catalog Number	Compound Name	Unit Size	Unit Price *	Qty	Total Price

\* Shipping, insurance, import duties/taxes, and export fees are not included in our listed prices. These will be determined and added when your order is shipped. We will only ship international orders Free on Board (FOB).

If you have specific packaging or testing requirements, you may provide them here. Additional charges may be applied.