

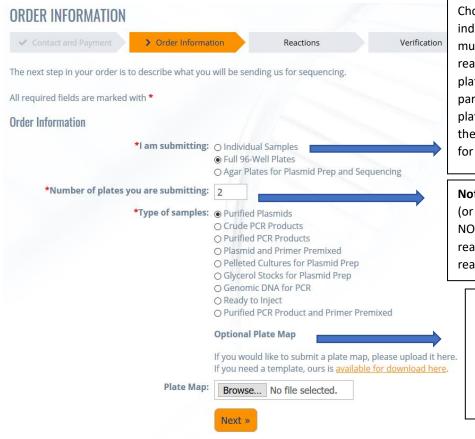
Order Form Instructions

1.) Fill out all applicable information:

Next »

> Contact and Payment	Order Informat	tion	Reactions	Verification	Confirmation
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required fields are marked v	with *				
ntact Information					
*First Name:	Nicole				
*Last Name:	Hillskotter				
*Company:	Functional Biosc	ciences			
Department:					
Laboratory:					
*Address 1:	505 South Rosa	Road			
Address 2:	Suite 238				
*City:					
*State/Province/Region:	WI				
*ZIP/Postal Code:					
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*Phone:	(,				
"Primary Email:	nicole@function	albio.com			
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2.) Fill out your sample information:



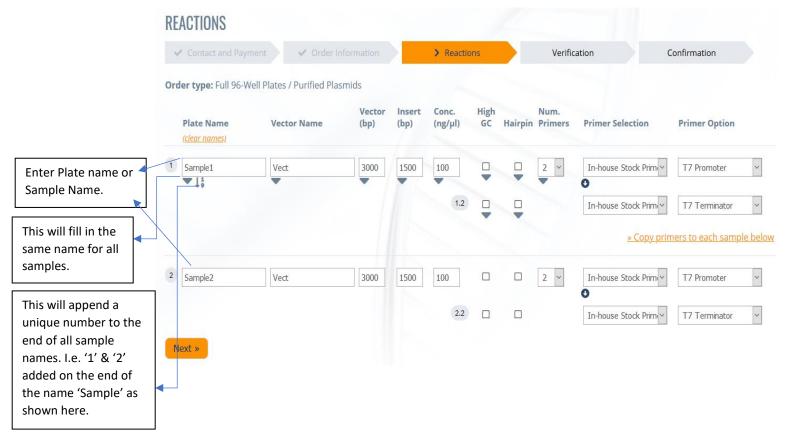
Choose how you are sending: as individuals or plates. **Note:** Plate orders must meet a minimum of 48 sequencing reactions and be submitted in a 96-well plate or strip-tubes. If you are sending a partial plate, this is considered a 'full plate' on the form, but will not be billed the full plate price. You will only be billed for the number of reactions sequenced.

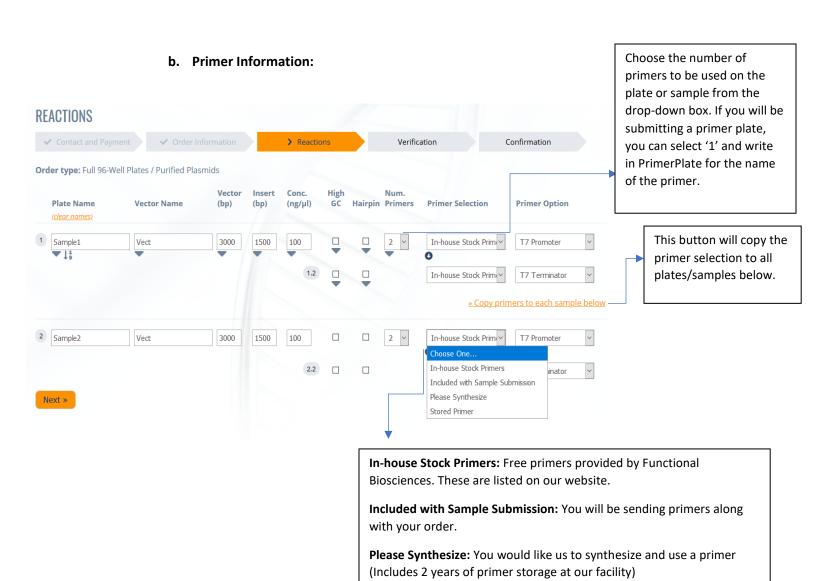
Note: This is the total number of *samples* (or sample plates) you will be submitting, NOT the total number of reactions or reads per sample. Primers and additional reads will be added on the next page.

This Plate Map is to be used for Plate orders to indicate your sample and primer layout. Please submit this with your plate order if you have specific sample and primer names you would like used for each well or if you have a unique primer layout that requires a map.

3.) Fill out additional sample information and primer information:

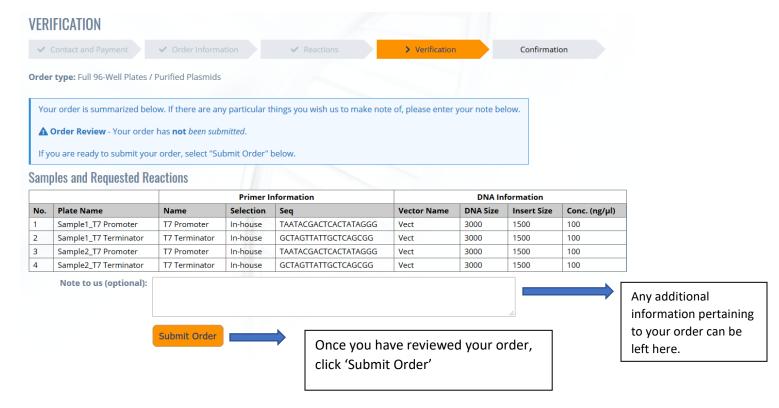
a. Sample Information:





Stored Primer: Primer is already at Functional Biosciences. We have either synthesized & stored this primer for you in the past, or you have requested that we store a primer for you in our long-term storage.

4.) Review & Submit



5.) Print a copy of your order form and send along with your samples

