

RIKEN BRC JAPAN COLLECTION OF MICROORGANISMS

ORDER FORM (payment by credit card)

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To: Japan Collection of Microorganisms
RIKEN BioResource Research Center

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Department / Division:		
Organization:		
Organization type (please check one)	<input type="checkbox"/> For-Profit	<input type="checkbox"/> Not-for-Profit
Address:	Zipcode:	Country:
Recipient E-mail:	Contact person E-mail:	
TEL:	FAX:	
Carrier: <input type="checkbox"/> FedEx Account No. () <input type="checkbox"/> TNT Express Account No. ()		
<input type="checkbox"/> Post (Registered mail, except Delivery Category " F". Please see Form M-10-2)		

BILLING ADDRESS		
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Department / Division:		
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Organization type (please check one)	<input type="checkbox"/> For-Profit	<input type="checkbox"/> Not-for-Profit
Address:	Zipcode:	Country:
Your purchase order no.:	VAT-No.:	
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Please specify JCM accession number(s), scientific name(s), and biosafety level(s) on the ORDER FORM by consulting the printed or on-line catalogue of strains, and send the ORDER FORM with two copies of the Material Transfer Agreement (Form M-11), and the Approval Form (Form M-12) and/or the Acceptance of Responsibility for Potentially Pathogenic Materials (Form M-13) when required, to the following address by mail or PDF.

Address:
Microbe Division / Japan Collection of Microorganisms (Column to be filled by RIKEN BRC)
RIKEN BioResource Research Center (Reception Date)
3-1-1 Koyadai, Tsukuba, Ibaraki 305-0074, Japan (Reception No.)
http://jcm.brc.riken.jp/en/ordering_e (MTA No.)
E-mail: inquiry.jcm@riken.jp

