



**SIGMA-ALDRICH**

**END USER DECLARATION FOR  
ANABOLIC STEROIDS FROM THE  
SIGMA-ALDRICH SWEDEN AB**

Catalogue Number \_\_\_\_\_ Quantity \_\_\_\_\_

Product name \_\_\_\_\_

Company / Institution \_\_\_\_\_

Department Name \_\_\_\_\_

End User Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, Province \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax number \_\_\_\_\_

**END USAGE INFORMATION**

The substance will be used exclusively for: (detailed information of enduse; we do not accept descriptions like "research purposes" or other)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I hereby certify that this item will be used strictly for legal and scientific research purposes and that it will not be re-exported. I also accept the addition of an administrative fee due to license costs.**

\_\_\_\_\_  
Authorized Drug Buyer's legally binding signature

\_\_\_\_\_  
Name in block letters

\_\_\_\_\_  
Date/Place

\_\_\_\_\_  
Position of signer

\_\_\_\_\_  
License number / other authorization