

PURCHASE ORDDER NO: REFERENCE:

PRODUCT NO: DISCRPTION:

Thank you for your recent order with Sigma-Aldrich. The U.S. Department of Commerce (DOC) regulates the above referenced item(s). Therefore, Sigma-Aldrich must obtain an export license from the U.S. DOC prior to delivery. The following outlines how the end usage should be filled out. The entire form should be **TYPED** or **PRINTED** clearly and in English. **Not completing all necessary requirements on the form will lead to delays in shipping of the product(s).**

Part A – Institution Name

The institution's name, address and phone number are required in this section.

Provide English translations.

Abbreviations are **NOT** accepted.

Provide website address if applicable.

Part B – End User Information

Include information regarding the end user who will be using the product and the intended use. The more information that is provided can possibly make a faster delivery.

Provide all information regarding the end user's educational background and past research. ***If this information is not completed, the form will be returned back to you.***

Provide detailed use of the product(s). Please be specific, define any technical terms, or jargon and provide literature references where possible. ***If this information is not completed, the form will be returned back to you.***

Provide email address if applicable.

Abbreviations are **NOT** accepted.

Part C – Are You Selling To A Third Party

Provide all names and addresses of all other parties involved.

Abbreviations are **NOT** accepted.

. Once we receive your completed end usage form and certification, we will submit our application to the U.S. DOC for our export license. We usually receive the license within **8/12** weeks.

The U.S. DOC reserves the right to ask for additional information if necessary.

If you would like to cancel the item, please mark the space below and return this letter

___ Please cancel the above referenced item(s) from our order.

Please return the completed document to the following fax number: 0800 378785 If you have any questions, please contact BETH KEIRLE on 0800 717181 Ext 3118

END USER INFORMATION

OUR REFERENCE NO:

Customer Number:

Sales Order Number:

Material Number:

Description:

PLEASE TYPE OR PRINT CLEARLY, NO ABBREVIATIONS

Part A: Institution Name

Institution Name:

Department Name:

Street Address:

City, Province:

Country: Postal Code:

Telephone

Fax

Website address

Part B: End User Information

End User:

(Full name please, no initials)

Email Address:

Past Research/Educational Background Information Complete in full, or attach CV

Detailed End Usage: Please be specific and define any technical terms or jargon used. General statements such as, “**For research use only**” are unacceptable. Provide literature references where possible.

PART C: Are You Selling To a Third Party or Exporting To an Overseas Facility within your Organisation

YES_____ **NO**_____please tick

HOW WILL THIS PRODUCT BE STORED:

SIGNATURE:_____

DATE_____

PRINT NAME:_____

JOB

TITLE_____

NO ABBREVIATIONS

IF THIS FORM IS NOT PRINTED CLEARLY WE WILL RETURN THE FORM TO YOU AND THIS WILL CAUSE DELAYS