

Biophysics Resource usage

E-Mail this complete Usage Form, with the specified Subject: "Biophysics Resource Usage," to Ewa Folta-Stogniew.

Order Date:

MM	DD	YY

Provide the following information:

Name of the instrument:

Date you want to use/be trained on the instrument (ITC training requires two days):

Time: from: _____ to: _____ you plan on using the instrument

Your Name: _____
Last Name First Name MI

PI Name: _____
Last Name First Name MI

Department: _____ Institution: _____

Telephone: () - : Fax: () - E-mail: _____

Billing Address: _____
Street Address City, State Zip Code

Shipping Address: _____
Street Address City, State Zip Code

Required Charging Instructions (Check one): P.O. Number-Amount: \$ NIDA Credit Card

PI E-mail: _____ Yale Charging Instructions:

Project	Task	Award	Expenditure Type	Organization
			8 3 3 6 2 0	

Does this order require split-charging? YES

(Please provide one PTAEO and our Business Office will contact you for additional PTAEOs)

(valid till- provide the exact date) or PO number to bill.

P.O. Number: _____

For billing using a credit card, Fill out [credit card form](#)

Provide information about Business Administrator that can be contacted for billing questions:

Name:

E-mail:

Phone number:

Billing Address:

No Messages will be honored that lack any of the above information.

The instrument is in room 2131, 300 George Street.