

# LIFE SCIENCES STOCKROOM

## Establishing An Account Form

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Please complete all of the following information in order to establish an account with the Life Sciences Stockroom.

**\*\* ALL SECTIONS WITH AN ASTERISK MUST BE COMPLETED.**

\* Project Director: \_\_\_\_\_

\* Account Number(s): \_\_\_\_\_

\_\_\_\_\_

**\*\* NO MORE THAN 3 ACCOUNTS (ANY COMBINATION OF STATE, RESEARCH OR AFFILIATE ACCOUNTS) CAN BE ON RECORD AT ANY GIVEN TIME.**

List of personnel/students authorized for stockroom purchases:  
**(IF LEFT BLANK, ANYONE WILL BE ABLE TO PURCHASE SUPPLIES ON THIS ACCOUNT.)**

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

\* Department: \_\_\_\_\_

\* Building: \_\_\_\_\_ \* Room: \_\_\_\_\_

\* Zip Code + 4 \_\_\_\_\_ \* Tel: \_\_\_\_\_ \*Fax: \_\_\_\_\_

P.D. email address: \_\_\_\_\_

Alternate contact name & phone # \_\_\_\_\_

\* P.I. Authorized Signature: \_\_\_\_\_

\* Date: \_\_\_\_\_

**WHEN COMPLETED, PLEASE FAX TO THE LIFE SCIENCES STOCKROOM AT 2-8597 OR MAIL TO Z-5201.**