



540 DIVISION STREET ■ CAMPBELL ■ CALIFORNIA 95008-6906 ■ USA
408-866-6363 ■ 800-726-3213 ■ FAX 408-866-6364 ■ EMAIL info@listlabs.com

Export License Statement

The following products have been ordered from List Biological Laboratories, Inc.:

Product number _____ Product Name: _____
Product number _____ Product Name: _____
Product number _____ Product Name: _____
Product number _____ Product Name: _____

Purchase terms for the products listed above:

1. are to be used in a laboratory by qualified personnel for research purposes only and will not be used in humans;
2. will not be used for diagnostic purposes (medical or veterinary);
3. will not be used for any illegal purposes;
4. will be disposed of properly and completely when research is completed;
5. may not be resold, transferred or re-exported without prior authorization by the United States Government.

Provide a complete description of specific end use: _____

Estimated # of vials needed for the 4-year license period: _____

Names, titles, and educational degrees of persons who will have access to the products and will work with the above mentioned products:

Name 1: _____

Name 2: _____

Name 3: _____

If abbreviations are used for your institution/company, provide the full-name equivalent:

Company name: _____

Complete Shipping Address: _____

City _____ Postal / Zip Code _____ Country _____

Telephone number: _____

By signing below, I agree to the terms stated above:

Authorized signature: _____ Date: _____

Print Name and Title: _____

End user email address(es) for notification: _____