

Order Form

Email completed Order Form to: volkhard.lindner@mainehealth.org

Product	Catalog #	Unit Cost (US \$)	Quantity	Total Cost
Anti-Cthrc1 monoclonal antibody	Vli13E09	\$300.00		
Anti-Cthrc1 rabbit monoclonal antibody	VLi55	\$275.00		
Anti-human Cthrc1 monoclonal antibody [Vli10G07]	Vli10G07	\$250.00		
Anti-human Cthrc1 monoclonal antibody -biotin conjugate	Vli10G07-bio	\$250.00		
Anti-human Cthrc1 monoclonal antibody [Vli19C07]	Vli19C07	\$250.00		
Anti-rat/mouse Cthrc1 monoclonal antibody	Vli08G09	\$250.00		
Anti-rat/mouse Cthrc1 monoclonal - biotin conjugate	Vli08G09-biot	\$250.00		
Anti-myc tag monoclonal antibody	Vli47	\$250.00		
Anti-myc tag, human c-myc antibody rabbit monoclonal	Vli01	\$250.00		
Human Cthrc1 ELISA Kit (do-it-yourself)	hCthrc1-ELISA	\$600.00		
VE-cadherin, cadherin 5 rabbit monoclonal antibody	Vli37	\$250.00		
ZO-2, Tight Junction Protein 2 (TJP2) monoclonal antibody	Vli13	\$250.00		
Anti-pSmad1,5,8 rabbit monoclonal antibody	Vli31	\$250.00		
Anti-pSmad1,5,8 rabbit monoclonal antibody	Vli49	\$250.00		
Anti-pSmad2 rabbit polyclonal serum	D8591 (replaced D6658)	\$250.00		

Customer Information

Name:	Date:
Email:	Telephone #:

Billing Address:

address

Shipping Address ☐ check here if same as billing

Name/Attn:	Name/Attn:
Institution:	Institution:
Address 1:	Address 1:
Address 2:	Address 2:
City	City
State/Province	State/Province
Zip	Zip
Country	Country

Credit Card

Card Number:	Expiration Date:
Amount to charge on card:	
First Name(at it appears on card):	Last Name (as it appears on card):
Company Name (if applicable –as it appears on the card)	
Billing Address associated with card	<i>Please provide information above</i>

Please credit the following: 140.87.140590. 50125.1500810101.50125

Questions? Contact Volkhard.Lindner@mainehealth.org

Thank you for your order!