Requestor:	
Institution and shipping address:	
Billing Information:	
Department (Acct / Proj #)	
Total # Oligos Ordered:	
Order Date:	
Date Needed:	

Maximum six modifications are allowed

Use different order form when ordering plain and phosphothioated oligos, write lower case for phosphorothioate bond

Note: in sequence ACgT the bond between g and C will be P=S

Assign number from 5-10 for any special modifications and specify

Please indicate the types of Purification desired **Desalting**/**RPHPLC**/ **Ion-exchange** HPLC/Gel Purification/ **Cartridge** Purification

5 =	**R**	**B**
6 =	**Y**	**V**
7 = 2'-O-Me-A *OR Spacer C3 linker or* ----------	**M**	**D**
8 = 2'-O-Me-C *OR Biotin OR*----------	**K**	**N**
9 = 2'-O-Me-G *OR Fluorsecein or* ----------	**S**	
0 = 2'-O-Me-U *OR Amino modifier (linker) or* ----------	**W**	**H**

Use following letters for IUB Code

Purification Desired	Your Part #/ Primer #	(Copy & Paste Special Values) Sequence	Desired Concentration	40, 0.2, 1.0,10,15, 25, 50 Scale	COMMENTS