

Product Description	Quantity (Units)	Price (USD)

Sub-Total	<input type="text"/>
Canadian Residents add 7% GST	<input type="text"/>
Shipping and Handling	<input type="text"/>
Total	<input type="text"/>

Customer Information

Name _____ Telephone () _____
 Company _____ Fax () _____
 Email _____

Shipping Method

Use My courier _____ Account Number: _____
 Please use any available courier and bill me

Billing Information

Billing Address

Suite No. _____
 Street _____
 City: _____
 State/Prov: _____
 Country: _____
 Zip/PC Code: _____

Shipping Information

Leave blank if same as billing address

Suite No. _____
 Street _____
 City: _____
 State/Prov: _____
 Country: _____
 Zip/PC Code: _____

Please fill out this form completely and send it to Vancouver Biotech LTD. by mail or fax.

Mail Option

Mailing Address
 9121 Shaughnessy St.
 Vancouver, BC
 Canada
 V6P 6R9



Fax Option

Fax number
(604) 325-4677