Signature

Printed name

KU-MACC Strain Ordering and Agreement Form

For official use Date: / The Obligating Officer, Kobe University Hiroshi Kawai, Professor Kobe University Organization of Advanced Science and Technology Research Center for Inland Seas I apply that Kobe University Macroalgal Culture Collection (KU-MACC) received an ordering of distribution of the strains as below. For requester Date: Requestor's full name (family name in capital letters): Requestor's affiliation and address: Tel: Fax: E-mail: I request the following algal culture strain(s): Scientific name(s) and strain number(s): Object of use (in detail): I accept the above conditions for ordering the strain(s).

Date