

Requisition form for sample analysis

Form No: _____

Name	
Organization	
Category	Industry/R&D Lab/Academic Institution/NGO/Trust
Address	
Email	
Mobile number	
Sample details	
Number of samples	
Solubility	
Sample codes	
Nature of samples	
Volume of the samples (gm/ml)	
Analysis details	
Type of analysis	
Details of the analysis required	

Date:

Signature

Account Details

BANK NAME : Bank Of Baroda
Account Name : TRICHY RESEARCH INSTITUTE OF BIOTECHNOLOGY PRIVATE LIMITED
Account Number : 27480200000329
IFSc code : BARB0THILLA, (0 is - Zero)
Branch : Thillai Nagar, Trichy.

Official Use Only

Total Amount	
Amount Paid (date)	
Balance	
Result status	
Date of analysis	
Results sent date	