Radionuclide Order Form

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| Requested By | | | | | |  | | | | | | | | | | | | | Authorized User | | | | | | | |  | | | | | | | | | | |
| Phone number | | | | | | |  | | | | | | | | | |  | | | | | | | | | | (Print) | | | | | | | | | | |
| Date of Request | | | | | | | |  | | | | | | | | |  | | | | | Date material required: | | | | | | | | | | | |  | | | |
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| **Material Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| How is the material to be used: | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
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| Material is to be: | | | | | | | | | **used** in room | | | | | |  | | | | | | | | **stored** in room | | | | | | | |  | | | | | | |
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| Credit Card Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type: | | |  | | | | | | | | | | Number | | |  | | | | | | | | | | | | | | | | | 3-Digit Code | | | |  |
| Name on the Card: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | Expiration Date | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Vendor / Order Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Vendor: | | | |  | | | | | | | | | | | | | | | | | | | | Telephone: | | | | | |  | | | | | | | |
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| Address: | | | |  | | | | | | | | | | | | | | | | | | | | FAX : | | | | | |  | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | Cust # | | | | | | | | | |  | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | Quote # | | | | | | | | | |  | | | |
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| Unit Cat. No. | | | | | Name of Item | | | | | | | | | | | | | Isotope | | Activity  (mCi) | | | | | | Volume (ml) | | | Unit Price | | | | | | Qty | Total Price | |
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| Authorized User's signature | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Date | | | | | |  | | | |
| **Order Approval** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Review Check List | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |  | | | |
|  |  | AU is authorized for the type, quantity, and use. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | The quantity requested will not exceed or cause to exceed the User's inventory | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | The quantity requested will not exceed or cause to exceed the Campus' inventory | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | The form is complete and valid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Approved and Ordered by: | | | | | | | | | | | |  | | | | | | | | | | | | | Order Contact: | | | | | | |  | | | | | |
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| Date Ordered: | | | | | | |  | | | | | | | | | |  | | | | Expected Delivery date: | | | | | | | | | | | | |  | | | |
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