|  |  |
| --- | --- |
| Company:  |  |
| (\*) Laboratory address:  |  |
|  | Technical Manager  |  |
|  | Phone number  |  |
|  | E-mail: |  |
| (\*\*) Invoicing address: |  |
|  | Financial Officer |  |
|  | Phone number  |  |
|  | E-mail: |  |
|  | Intra-community VAT |  |

*(\*) The document for the archiving of results shall be sent at the same time as the sample, namely 30.07.2021. To the laboratory address indicated in the table.*

*(\*\*) The invoice shall be sent 1 month before the start of the round, namely 30.06.2021. To the billing address indicated in the table.*

**Participation fee (\*\*\*): 450,00 €**

(\*\*\*) This fee includes the supply of the product and associated transport costs, the supply of the results file to be completed and the final report containing the exploitation of the results. This fee is only valid for participants based in the European Union, as other participants may have to pay additional transport costs.

**Terms:**

* All prices quoted are exclusive of VAT which will be charged at the current rate.
* Work will proceed on receipt of a signed copy of this document along with an official purchase order.
* This quotation is valid for three months from date of issue.

**Acceptance of this Quote**

I, the undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ representative of the company/laboratory \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ acknowledge having learned of the contents of the attached proposal and conditions of sale and fully accept them.

My signature in the present document is valid as a purchase order for services to SHAPYPRO as of this day \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature and company/laboratory stamp*

*Thank you, please return this form to the e-mail address* *info@shapypro.com*