



11601 Ironbridge Rd, STE 101
Chester, VA 23831
Phone: 844 812 7415
Email: info@nextbiollc.com

Order Form for Miscellaneous Services

Shipping Information	Billing Information
Contact Name: _____ Company Name: _____ Address: _____ _____ Phone: _____ Fax: _____ Email: _____	Contact Name: _____ Company Name: _____ Address: _____ _____ Phone: _____ Fax: _____ PO#: _____ If paying by Credit Card, please complete a Credit Card authorization form.

Detail the Service Requested, or indicate the quote/proposal number from NEXT Bio:

Comments, Additional Information:



11601 Ironbridge Rd, STE 101
Chester VA 23831
Phone: 1-844-812-7415
Phone: 1-804-977-6600
Fax: 1-804-977-6630
Email: info@nextbiollc.com

Service Agreement

Service:

NEXT Bio-Research Services ("NEXT Bio") endeavors to provide timely, quality service, with rapid return of analytical results to our Client. We will promptly notify you of any unexpected delays. We will follow applicable written protocols for all services provided, and will provide proof of accepted analytical techniques, as requested by you. NEXT Bio will provide data and/or summary sheets of all results obtained.

Payment:

In exchange, the Client agrees to pay in full, for the services delivered to client in full within 30 days of receiving NEXT Bio's invoice for the services performed. NEXT Bio makes no expressed or implied warranties for the results that are obtained and unless there is an instrument malfunction, a technician error, or some fault directly attributable to NEXT Bio. PAYMENT IN FULL IS EXPECTED UNLESS PREVIOUS ARRANGEMENTS ARE MADE WITH NEXT Bio.

NEXT Bio will not be held liable for results obtained with Clients' samples. NEXT Bio expressly guarantees to perform all its procedures with professional diligence, and strives to perform quality work acceptable to all its Clients.

Date of this Agreement: _____

A handwritten signature in black ink, appearing to read "Robert B Harris".

Robert B Harris, PhD
Chief Financial Officer and Chief Science Officer

Client Signature: _____

Client Name: _____

Title: _____

Company Affiliation: _____