



Cytiva
100 Results Way
Marlborough, MA 01752

Dear Valued Customer,

The Customer Service team at Cytiva appreciates your business and understands how important it is to get your orders processed promptly. We would like to share with you the required information for a valid purchase order to ensure timely processing.

If any of the information attached is missing from your purchase order ("PO") or the pricing is incorrect, we will be unable to ship your order until a revised PO is received. Please contact the Customer Service team if you have any questions regarding the attached requirements, or to verify current pricing in advance of placing a PO.

Cytiva's Customer Service Contact Information

Email: CustomerService.US@cytiva.com

Telephone: 800-526-3593 Option 2

Sincerely,

The Customer Service Team



How to Submit a Purchase Order

Order Online www.cytiva.com

Create or use your account online at www.cytiva.com to submit POs with contracted pricing automatically reflected.

Email CustomerService.US@cytiva.com

POs can be submitted by email to CustomerService.US@cytiva.com. Please be sure your attached PO includes all the information below to be processed promptly. Always use the email address above; any order or email sent directly to a Customer Service Representative may experience a delay if the Representative is unavailable.

Required Information on a Purchase Order

Purchase Order

Vendor Name and Address

Vendor name must be our legal company name*- **Global Life Sciences Solutions USA LLC** and the address below:

Global Life Sciences Solutions USA LLC
100 Results Way
Marlborough, MA 01752

*If our legal company name exceeds a PO system character limit, we can also accept **Global LS Solutions USA LLC**

Bill To

Customer Name, Address (Including Dept, Bldg, and/or Attn line), Contact (Name or Dept, Email, Phone)

Ship To

Customer Name, Address (Including Dept, Bldg, and/or Attn line), Delivery Contact (Name or Dept, Phone)

Payment Terms

Cytiva's standard payment terms are Net30. Deviations from this must be approved in a Master Supply Agreement.

Item Information

Each line item must include:

- Cytiva catalog number
- Quantity
- Unit of measure
- Price per unit

Total Price of the Order

Quote

If a quote was issued, the Purchase Order must include the quote number. Quote pricing & Purchase Order pricing must match.



Optional Information on a Purchase Order

Request Dates (If Applicable):

Cytiva orders should be placed in accordance with standard product lead times. Please include any request dates for product delivery. All requests are subject to review, and our Customer Service team will reach out if additional information is required.

Product or Shipping Requirements (If Applicable):

Please include specific requests regarding single lots, certificates, or other product or shipment needs. All requests are subject to review, and our Customer Service team will reach out if additional information is required.



Thank you for choosing Cytiva. To assist in the setup of your account, please complete the form below and return via email to our Customer Service team. Please be advised that it may take 1-2 business days upon receipt to complete your account set up. Contact our team if you have any questions or require assistance.

United States: CustomerService.US@cytiva.com 1-800-526-3593

Canada: CustomerService.CA@cytiva.com 1-800-463-5800

Are you a Distributor?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a Government Contractor?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you Export?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you Partially or Fully Tax Exempt?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No

***If Partially or Fully Tax Exempt, a copy of your tax-exempt certificate must be returned with this form**

The certificate must be made out to Global Life Sciences Solutions USA LLC, 100 Results Way, Marlborough, MA 01752 and must also indicate the Property and Service to be Purchased, Name of Purchaser, and be signed and dated.

Bill To Information:

Account Name:	
Street Address	
Address 2 (Optional)	
City:	
State or Province:	
Zip:	

Ship To* Information

Account Name:	
Street Address	
Address 2 (Optional)	
City:	
State or Province:	
Zip:	

*Please provide a valid business address to avoid delays in order processing

Invoicing & Shipping:

If you would prefer Cytiva send your invoice electronically, please submit an email address below. Please consider that this email address will receive all invoices for this account; we suggest providing a general mailbox address such as billing@companyname.com.

- ☐ Yes, Please Set Up my Account for Electronic Invoicing
Email Address to Send Invoice To: _____
- ☐ No, Please Send my Invoice by Mail to my Bill To Address