# LBIC / Histology

Registration for new users, information will be used for invoicing.

Name…………………………………………………….

PI\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment liable.……………………………………………………..

Institute…………………………………………………..

Department………………………………………………………

Kostnadsställe. …………………………………………………..( If not known, ask your economy administrator.)

Mail………………………………………………………