eppendorf

epPoints® Transfer Form

Please return the completed form by email to myeppendorf@eppendorf.de

I hereby authorize Eppendorf SE to carry out the transfer of my epPoints account on my behalf. (This request is only effectual if this box is ticked.)

Previous epPoints account data: (For security reasons. On request the recipient will be informed about your name and your company)

epPoints Username/E-mail	Street/No.
epPoints Password (to serve as security)	ZIP/City
Company/University/Hospital	Country
Institute/Department	Country Code/Phone
Title/Name/Surname	_

Please transfer the epPoints to the following existing account:

Here you can create a new myEppendorf account: www.eppendorf.com/login

epPoints Username/E-mail	Street/No.
Company/University/Hospital	ZIP/City
Institute/Department	Country
Title/Name/Surname	Country Code/Phone

Kindly note that the previous account will be deactivated after the epPoints have been transferred.

Date/Signature

Your local distributor: www.eppendorf.com/contact Eppendorf SE \cdot Barkhausenweg 1 \cdot 22339 Hamburg \cdot Germany eppendorf@eppendorf.com \cdot www.eppendorf.com

www.eppendorf.com

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