

遗传操作中心 Genetic Manipulation Core

Service Request Form for mRNA Transcription

Service Application		Name:		Service Applicant	Name:			
Principal Investigator 服务申请实验室负责人		Email:		服务申请人	Ema			
加以为	中明天巡主贝贝八 I	Phone:			Phone:			
	Filled by requester					Filled by our staff		
#	mRNA size	Promoter		Enzyme used to		Volume	Concentration	
	(kb)	(T7, SP6 or others)		Linearize Vector		(u1)	(ug/ul)	
1								
2								
3								
4								
5								
6								
7								
8								
提供者签字及日期 Provider Signature and Date				领取人签字及日期 Receiver Signature and D	ate			