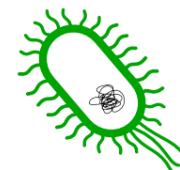




Entry Clone/LR Request Form SIDNET Core Facility



Section I: Requestor Information

Order Information	Billing Information
Date:	Bill To:
Requestor's Name:	Address:
Department:	Address:
Requestor's Email Address:	Dept ID/Cost Centre/PO#
Requestor's Phone Number:	Credit Card # Exp Date:
Principal Investigator:	Name on Card:
	Type of Card: Visa MasterCard AmEx

Entry Clone/LR Information (please provide as many details as possible)

#	Gene Symbol	SIDNET ID	Acc#/GenBank ID	Collection <small>[Human ORFeome, Ultimate ORF, etc]</small>	Plate	Well	Destination Vector
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

Destination Vectors:

Mammalian Destination Vectors			Bacterial Destination Vectors	
pcDNA-DEST40	pDEST27	pcDNA3.1 nHA-DEST	pDEST14	
pcDNA-DEST47	pcDNA3.1 mOrange-DEST	pcDNA3.1 nFlag-DEST	pDEST15	
pcDNA-DEST53	pcDNA3.1 mStawberry-DEST	pcDNA3.1 nMyc-DEST	pDEST17	
pcDNA3.1 nV5-DEST	pcDNA3.1 mCherry-DEST	pT-Rex-DEST31	pEXP3	
pcDNA3.2-DEST	pcDNA6.2 C-EmGFP-DEST	pcDNA3.2 cMyc-DEST	Other (please specify)	
pDEST26	pcDNA6.2 N-EmGFP-DEST			

Special Instructions:

Email Completed Form to Diane Ly <dianely@sickkids.ca>