



Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Lab PI Name: \_\_\_\_\_ P.O. #: **or** \_\_\_\_\_  
 Department: \_\_\_\_\_ Account #: \_\_\_\_\_  
 Institution: \_\_\_\_\_ *Note: all requests require an account or P.O. #*

How do you want your sequences sent (circle one)? E-mail, Zip Disk, or Floppy Disk \*  
 \*Please leave a blank disk in the drop off box (note: 1 floppy disk/7 sequences)

date order received: \_\_\_\_\_ drop off box #: \_\_\_\_\_ date work completed: \_\_\_\_\_

reaction #	DNA template ID # (first, middle, & last initials... followed by —#)	sequencing primer (T <sub>m</sub> if PCR primer) and concentration	DNA template source: (ds plasmid, ss, PCR product, etc.)	size and concentration
example	DLN-1	M-13 (-21) (3 μM)	ds plasmid	4 kb 200 ng/μl
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				