

Transgene Technologien, Charité Universitätsmedizin Berlin

Request for Cryokonservation

On a PC (not Mac): To enable saving the document please complete the form with the program „Foxit PDF Reader“!

Completed by the Transgenic Technologies (Documented by: _____)

Date of receipt _____ Ordernumber _____

Your order is certified herewith. If you have any further **queries or changes** to the order, please use the **Ordernumber**. The current prices are listed in the „Entgeltordnung“ from the 01.07.2009.

Project leader

Project number

Last name _____ First name _____

eMail _____ Phone _____

Institute _____

Accountnr. _____

Order for Cryokonservation Yes No **or thawing** Yes No

Cryokonservation via _____

Which strain / line shall be used as the donor of oocytes

IVF with strain / line _____

Strain- / Linendata of the animals used in for IVF

Name of the line _____

Labname of the line _____ Background _____

MGI ID (Line ID) _____ Jax Stock Number _____

Reference (1st citation)

Breeding scheme, Breeding performance, Vigor of the line

Generation

Inbred Yes No

F _____

Back / Outcross to _____ **N** _____

Notes:

Are homozygous **Male**

	fertile		viable	
Are homozygous Male	_____	_____	_____	_____
Are homozygous Female	_____	_____	_____	_____

Are homozygous **Female**

Specifics of the breeding
