

Transgene Technologien, Charité Universitätsmedizin Berlin

Request for In vitro Fertilisation (IVF)

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 **Order number**

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

Project leader

Project number

Last name First name

eMail Phone

Institute

Account no.

Data concerning IVF / thawing / embryotransfer (ET)

* IVF for rederivation including cryopreservation when the number of surplus embryos is > 80

Aim of the IVF Rederivation Cryorederivation* **Thawing of** Embryo Sperm

ET with fresh embryos

Sperm-donors Oocyte-donors

Information about the line that should be thawed or used in the IVF respectively

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

	fertile?	viable?	
Are homozygous males	<input type="text"/>	<input type="text"/>	<input type="text"/>
Are homozygous females	<input type="text"/>	<input type="text"/>	<input type="text"/>

