



Stable Cell Line Service Form

**** Please complete this form and email to quotes@abmgood.com**

Customer Information

Title:	<input type="text"/>	Name:	<input type="text"/>
Institution:	<input type="text"/>		
Address:			
Street Number:	<input type="text"/>	Unit:	<input type="text"/>
City:	<input type="text"/>	State:	<input type="text"/>
Country:	<input type="text"/>	Zip Code:	<input type="text"/>
Phone:	<input type="text"/>	Email:	<input type="text"/>

Parental Cell Line Information

Cell Line Name:	<input type="text"/>	<input type="checkbox"/> Adherent	<input type="checkbox"/> Suspension	<input type="checkbox"/> Other	
Cell Source:	<input type="checkbox"/> abm	<input type="checkbox"/> Customer			
<i>Please complete if a customer is providing cells</i>					
Species:	<input type="text"/>	Cell Type:	<input type="text"/>	Organ:	<input type="text"/>
Complete Medium Composition:	<input type="text"/>				
Culture Conditions:	<input type="checkbox"/> Standard (37°C, 5% CO ₂)	Other:	<input type="text"/>		
Any Known Antibiotic Resistance?	<input type="checkbox"/> None	<input type="checkbox"/> Puromycin	<input type="checkbox"/> Neomycin	Other:	<input type="text"/>
Mycoplasma:	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive	<input type="checkbox"/> No Data		
STR Information:	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
Other Unique Culture Information:	<input type="text"/>				

Target Gene Information

Gene Name:	<input type="text"/>	Species:	<input type="text"/>	NCBI (Accession Number):	<input type="text"/>
Vector Source:	<input type="checkbox"/> abm	Customer:	<input type="text"/>		
Tag Information:	<input type="checkbox"/> No Tag	<input type="checkbox"/> HA	<input type="checkbox"/> His	<input type="checkbox"/> Flag	Other: <input type="text"/>

Over-expression Detection Method

☐ qPCR

☐ WB **Primary Antibody Source** ☐ Customer ☐ abm
 Tag Antibody Source ☐ Customer ☐ abm

Deliverable

2 vials of the same clone

qPCR/WB Data

Mycoplasma detection report

Deliverable Timeline

Standard:

Special:

Add-on Service Request

Additional vials of cells (No.)

Additional clones (No.)

☐ STR Profile ☐ Parental ☐ Stable Clone

Additional Comments

Quotation