

Stable Cell Line Service: Parent Cell Line Submission Form

One vial of the parent cell line should be provided if you choose OriGene's Stable Cell Line Services. Please send a copy of this completed form with your shipment.

1. Name of parent cell line: _____
2. Source of parent cell line: _____
3. Cat# of parent cell line: _____
4. Viable Cell #/Vial: _____
5. OriGene Custom Cat # _____
(OriGene's Cat # (ex. CLxxxxxx) will be provided *in* the quote you receive from technical support/sales)
6. Provide the proof of a negative Mycoplasma testing result if cells have been cultured in the lab
7. Complete cell culture media formulation:

8. Optimal drug (Puromycin, G418, or Hygromycin) concentration for stable cell selection if available:
Drug name: _____; Concentration: _____

Please ship one vial of parent cell line in dry ice to:

Dr. Dezhong Yin
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OriGene
Technologies
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Rockville, MD 20850