

Name: _____
Phone: _____
Date: _____
Colors: _____
Species of Origin: _____
Cell type: _____
Tube Count: _____
Number of Sort Samples: _____

PI:				
Speedtype:				
Machine:	CAria	DV-1	MoFlo	BSL3 Aria
Biohazard Level:	1	2	3	
Documentation Required:	Yes	No		
Target Sort Populations:	1:			
	2:			
	3:			
	4:			