

KIGene

Genetic analysis at CMM.

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Name: _____
Department: _____
Address: _____
Ftp user name: _____
Group leader¹: _____
Reference of approver: _____
Phone nr/ e-mail: _____

Order form for pre-made sequence reactions

Mark the type of sequence kit that has been used:

- DYEnamic ET terminator cycle sequencing kit including MegaBACE (Amersham).
 BigDyeTM Terminator v1.1 or v2.0 Cycle Sequencing Ready Reaction Kit (Applied Biosystems).
 BigDyeTM Terminator v3.0 or v3.1 Cycle Sequencing Ready Reaction Kit (Applied Biosystems).

Do you want printouts by mail? yes no

How long sequence do you need? ≤ 500 nts ≥ 500 nts

Sample²

1: _____	16: _____
2: _____	17: _____
3: _____	18: _____
4: _____	19: _____
5: _____	20: _____
6: _____	21: _____
7: _____	22: _____
8: _____	23: _____
9: _____	24: _____
10: _____	25: _____
11: _____	26: _____
12: _____	27: _____
13: _____	28: _____
14: _____	29: _____
15: _____	30: _____

Note: ¹ this is the person that pays the invoice.

Note: ² Please, only use letters, numbers, dots and hyphens in the sample name (total 8 characters).