

Rücksendung

**Beckman Coulter
 Biomedical GmbH
 Advalytix Products
 Sauerbruchstr. 50
 81377 München**

Order Single Cell Analysis

Company				
Contact person				
Telephone				
Fax				
Street				
ZIP, city				
Country				
Transportation, Arrival Munich	ICE:		Flight:	
Internal remark				


Pricing of the analysis will be according to official price list for order number OAX04605.

Please fill in next page ⇒

Customer-Informationen on samples:

Serial number slide:	
Deposition, date, time:	

Please mark the positions with cells deposited:

AmpliGrid		1	2	3	4	5	6	7	8	9	10	 single cell service Seriennummer
	A	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
	B	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

_____ date


_____ signature

Only to be filled in by Advalytix !

Eingangskontrolle Slide:

Bearbeiter:	
Zeit / Datum:	
Seriennummer des Slides:	
Ablageplan vorhanden:	

Mikroskop-Kontrolle: Belegte Positionen bitte ankreuzen:

AmpliGrid		1	2	3	4	5	6	7	8	9	10	 single cell service Seriennummer
	A	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
	B	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Übereinstimmung mit Kunden-Info:	
Abweichungen:	
Bei Abweichung Rückruf, Zeit:	
Ergebnis des Rückrufs:	

_____ Unterschrift Bearbeiter