

RIKEN BRC

FROZEN SAMPLE DATA SHEET

DEPOSITOR:

Depositor Staff: _____

Depositor Organization: _____

Address: _____

Date: _____

Please fill in the forms bellow.

Reg_No _____ Strain Name _____

Strain Common Name _____

Frozen sample Ova + embryo Sperm Spermatogenic cell ES cell Others

Stock tube Straw (capacity/ ml) Cryotube (capacity/ ml) Others

Freezing method

Slowly freezing Vitrification (EFS) Vitrification (DAP213) 18% raffinose/3% skin milk solution (for sperm) Others

Developmental stage of the frozen embryo

unfertilized ova pronucleus fertilized egg 2-cell stage 8-cell stage ~ morula Others

Parental Genotype of frozen embryos Homo x Homo Hetero x Hetero Homo x Wild Hetero x Wild

Sample Data

Tube_color	Tube_No	Label_name	Generation	Number of eggs	Date of Stock

Number of tube

Remarks (Recovery rate etc.)

Thank you for your cooperation.

Please send to:
Experimental animal division
RIKEN BioResource Center
3-1-1 Koyadai, Tsukuba, Ibaraki 305-0074
JAPAN
Fax : +81-29-836-9010

(Column to be filled by RIKEN BRC)

(Reception Date)

(Reception No.)

(User No.)