A · A · C Genomics Facility

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Dye Terminator Cycle Sequencing Plate Requisition Tracking Sheet (completed fluorescent product)

Client Name	Lab Position
Email	Department
Phone	Supervisor

Supervisor Signature (required): _____

Billing Information *GL Coding (26 digits)*

Fund (3)	Unit (6)	Grant (6)	Project (6)	Object (5)
				64251

Plate Record ☐ Email ☐ Provided Disc

Results ☐ Email ☐ Network ☐ Pick-up

Date	Plate ID	Run	Comments