



shRNA REQUISITION FORM

LAB: _____

DATE: _____

REQUESTOR: _____

PHONE EXT.: _____

EMAIL: _____

PO # (MANDATORY FOR NON-UMDNJ): _____

	OLIGO ID	GENE NAME	PRICE
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PRICES:
\$25/individual clone
\$60/gene set
\$200/4 controls

Search for clones at: <http://www.openbiosystems.com/RNAi/shRNAMirLibraries/GIPZLentiviralshRNAMir/>

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