



Principal Investigator : _____	Date Requested: _____	Budget Administrator: _____
Person Requesting Service: _____ Department/Campus _____		
Address : _____		
Office Phone _____	Lab Phone _____	Fax _____ E-mail _____
SAP Number/PO#: _____		Expiration Date: _____

**The cells and/or cellular products processed by the Cell Center are not for human diagnostic or therapeutic use.**

**Non JHMI users add 16% to price**

### Cell Culture/Shipping Supplies

Quantity	Unit Price	Description
_____	\$37.00	Box of 100 ACD vacutainer tubes, 6 ml draw
_____	\$53.00	Box of 100 ACD vacutainer tubes, 8.5 ml draw
_____	\$37.00	"Mr. Frosty" cryopreservation container
_____	\$1.00/label	Printing of bar-coded labels
_____	\$0.50	DOT labels: Class 9 dry ice, UN3373 Category B

### Educational Resource Library

Quantity	Unit Price*	Description
_____	\$100/hr	Consultation and/or Biosafety Cabinet Cleaning
_____	\$25	Cell Culture workbook (with Consultation and/or Biosafety Cabinet Cleaning only)

Signature: \_\_\_\_\_