**REQUISTION FORM FOR FLOW CYTOMETERIC ANALYSIS**

**NAME:**

**DESIGNATION:**

**ADDRESS**:

**TEL. / MOBILE NO. :**  **EMAIL:**

**CODE OF SAMPLES:**

**NATURE OF SAMPLE (BLOOD/CELL CULTURE ETC.):**

**SOURCE OF SAMPLE: ANIMAL HUMAN**

**TARGETED ANTIGEN (RECEPTORS/ CD MARKERS ETC.):**

**DETAILS OF ANTIBODY PROVIDED:**

**METHODS SUGGESTED IF ANY:**

**ANY OTHER INFORMATION REQUESTED:**

 **DATE: / /**

 **SIGNATURE**

**For Office Use Only**

**S. No.**

**Date:**