**After-Sales Service Form (For TUNEL)**

Thank you for taking the time to complete this form.

For troubleshooting purposes, please fill out all sections completely and provide the form in a timely manner.

After-sales service is guaranteed throughout the product's shelf life.

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| **Customer information** |
| Name |  | E-mail |  |
| Tel. |  | Demand | [ ]  Technical support[ ]  Exchange[ ]  Others |
| Problem | Please describe your current problem.  |
| **Product information** |
| Cat No |  | Lot No. |  |
| Date of receipt |  | Date of use |  |
| Storage temperature |  |
| **Instrument**  |
| Detection instrument | [ ]  Light microscope[ ]  Fluorescence microscope [ ]  Flow cytometer[ ]  Others  | Brand & Model |  |
| Ex/Em (nm) | If Light microscope is used, leave this field blank. | Filter Set | If Light microscope is used, leave this field blank. |
| **Sample**  |
| Species |  | Sample type | [ ]  Tissue [ ]  Cells [ ]  Others  |
| Tissue(Fill in only if it is a tissue sample) | [ ]  Paraffin Section[ ]  Frozen Section [ ]  Others  | Cells(Fill in only if it is a tissue sample) | [ ]  Cell slide[ ]  Cell smear[ ]  Cell suspension[ ]  Others  |
| Other samples(Fill in except cell and tissue samples) | Please describe in detail. |
| Supplementary information of sample | Whether the sample contain fluorescence, if so, what type of fluorescence, please specify. |
| Fixation and permeabilization steps of samples | Please describe as detailed as possible. |
| **Control samples** |
| Whether set a negative control?[ ]  Yes[ ]  No |
| Whether set a positive control?[ ]  Yes[ ]  No |
| **Operation steps** |
| Please describe as detailed as possible. |
| **Experimental results** |
| Description of experimental results (if the experiment is repeated, please describe separately and attach detailed data/pictures of the results), or attach raw data separately. |