

EXAMPLE

User Name:	Lab:	Session Date:	Morning Afternoon Evening
Sample:			
Dewar & storage tube name:		<input type="checkbox"/> Talos	<input type="checkbox"/> Titan Krios

所有未clip的grid
 請用此表
 標明順序
 以便clip
 的順序

Grid Box Name: A

Grid Box Name: B

Grid Box Name:

← Total grids: _____
 _____ grids need to clip

Fill out

Auto-Grid Box Name:	1
	2
	3
	4
Auto-Grid Box Name:	1
	2
	3
	4
Auto-Grid Box Name:	1
	2
	3
	4

Total clipping: _____

STAFF USE

USER SIGN: _____