NanoFCM Flow NanoAnalyzer Request Form

General Information

First Name Last Name

Title

University/Institute

Address

E-mail Address

Phone

Research Interests/ Principal Service

How do you get to know NanoFCM?

Friend

Conference Presentation Publication

Web Search

Type of Inquiry

Technical Information

Request a Call

Request Sample Testing

Request a Demo

Other, please specify

Description of the Application

Currently Available Instruments/ Methods

Drawbacks of Existing Instruments/Methods

Expected Function of Flow NanoAnalyzer

Sample Types and Parameters (Please provide detailed information, including sample source, number, dyes (Antibodies), and the number of fluorescent channels)

If Flow NanoAnalyzer meets your requirements, are you willing to purchase one?

No

Yes

If Yes, intended purchasing time

If you are testing Exosomes/ Extracellular Vesicles, do you have an ultracentrifuge? Yes No Rotor Type

Other information you would like to share/Your suggestions/ comments will be highly appreciated.

IMPORTANT NOTE:

The information filled must be truthful and accurate, for further verification.

Please send this form to E-mail: lingma@nanofcm.com

NanoFCM Inc. reserves the right of final explanation and revision for the application form.



NanoFCM Inc.

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