

Viral Vector Core
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 For Prices & Information visit Web Page:
[Viral Vector Core Laboratory](#)

Investigator Information

Investigator: _____ **Contact (if other than PI):** _____

Institution: _____

Phone: _____ **Email:** _____

Shipping Address: _____

Accounting Information

Accounting Contact: _____ **Email:** _____ **PHONE:** _____

Account Address: _____

UofSC Account #: _____ **Purchase Order #:** _____

Project Information

Project Description: _____

Gene of Interest: (G of I) accession#: _____ **(G of I) Promoter:** _____

Will vector be used in animals? Yes or No _____ If Yes, please provide species: _____

Adeno-Associated Vector (AAV): Generation, purification & concentration

Specify AAV Serotype: _____

_____ ~150 µL Titer: 1x 10¹¹ vg/mL - 1x 10¹² vg/mL
 _____ ~0.5 mL Titer: 1x 10¹¹ vg/mL - 1x 10¹² vg/mL

Lentiviral Vector (LV): Generation, purification & concentration

_____ 0.15 mL Titer: 1x 10⁷ TU/mL - 1x 10⁹ TU/mL
 _____ 0.3 mL Titer: 1x 10⁷ TU/mL - 1x 10⁹ TU/mL
 _____ 0.6 mL Titer: 1x 10⁷ TU/mL - 1x 10⁹ TU/mL

Do you want LV supplied as aliquots of 10-20 µL?
 Y or N? _____ If yes, what volume? _____

Agreement: *Safety information of the gene of interest has been provided above to the best knowledge of the Primary Investigator (PI). The PI has or will register the vector described above with the Institutional Biosafety Committee or its equivalent at his/her institute. Published study involving use of any gene transfer vectors prepared at the UofSC Viral Vector Core must acknowledge the Vector Core and the PI agrees to provide the Vector Core with a publication record. Gene transfer vectors prepared by the Vector Core are not for application in human beings. Both USC, and the Vector Core shall not be held liable for any outcome in connection with use of the vectors by the PI.*

PI Signature _____ Date _____