

Batch ID: M Expiry Date: _____

Work Station No:	Hood Cleaned	Service due-date	Comments

Media Component	R/P/M/C Number	Aliquot no.	Aliquoted date	Expiry Date	Quantity	Comments
80% KO-DMEM		N/A	N/A			
20% KO-SR		N/A	N/A			
2mM L-Glutamine						
1X NEAA						
0.1mM 2-mercap						
4ng/ml hbFGF		N/A	N/A			
Filter Unit		N/A	N/A			
Receiver/Tube/ Media bottle		N/A	N/A			

Volume	Aliquot IDs	Comments
500ml		
250ml		
Other:		

Additional Comments

Prepared by _____ Date _____

Your signature indicates that you have checked that all reagents and consumables used have been released for use and are within their expiry date and that the procedure has been performed in accordance with the current version of WI.TC.02.B.

Batch Test Sample & Media Record Submitted		Volume 100ml
Initial		Date

Formulation Review	
Initial	Date

QC Result:	
Initial	Date

Approved by _____ Date _____

Your signature indicates that you have reviewed this media formulation record, agree with the QC test results and therefore consider this batch to be released for used.