

Collection Date: _____ Coll. Location: _____

Experiment Date: _____ Coll. Temp: _____

Exp. Start/End Time: _____ Ramp Start (°C): _____

Water Bath: _____ Thermometer: _____

Notes	Tube #	CT _{max} (°C)
	1	
	2	
	3	
	4	
	5	
	6	
	7	
	8	
	9	
	10	