**Additional investigation plan sheet**

**of AO (#) for astromaterial samples**

**Submission date of this document (MM/DD/YYYY):**

**Proposal Title:**

**PI Name:**

**Co-I Name:** Name of new collaborator(s), if added.

**Sample Name:**

**Investigation plan:**

If you have any changes for the original proposal, please fill out for details.

**Sample processing plan:**

If you have any changes for the original proposal, please fill out for details.

**Estimated sample return date：**

Please fill out the estimated date.