



Proteomics International

REQUEST FORM 010

Protein Sequencing (Edman, N-terminal)

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Lab Use



Accreditation No: 16838
 ISO 17025 certified

Contact details		
Name		Billing Address
Organisation/ Institution		Email
		Telephone
Purchase Order Number		Fax

Sample Information - Please sign & complete sample details on page 2	
Source: (e.g. PVDF membrane, aqueous sample)	Staining Method: Blot/Membrane Type: Notes: <ul style="list-style-type: none"> Only sequencing grade PVDF membrane can be used Nitrocellulose must not be used A photocopy of the stained membrane MUST be supplied. Please circle band(s) to be sequenced.
Organism:	
Amount of protein in sample:	
Buffer composition for liquid or freeze dried sample:	
Volume of liquid sample:	
Purity of sample:	
Chemicals used for reduction and alkylation, if any:	Do you require cysteine detection? Note: For cysteine detection, sample must be supplied in solution or lyophilised

Consult 1st Base for latest price information (Feb 2012).

Service 010 - Protein Sequencing (Edman, N-terminal)	Price
Set up fee	Enquire
Per amino acid	Enquire
Minimum fee (including no result)	Enquire

Lab use only:

Received (Prep):		Special considerations:	
Processed/Operator:		Report reference:	
QC No:		Checked:	
Batch:			

For each sample please provide the following information if known:

No.	Sample number /identification	Molecular mass (kDa)	Number of cycles (amino acids) required:	PI number: (Lab use only)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

(Please append extra table if required)

Comments:

Please sign here below:

1. I have read and understood the Proteomics Analysis Price List and agree to the charges and to Proteomics International's standard Terms and Conditions (available at <http://www.proteomics.com.au/TermsAndConditions>).
2. **Hazards:** I declare that the sample(s) are non harmful, non-infectious and non-radioactive.
3. I have completed both pages of this submission form with details for each sample submitted for analysis.

Authorised Signature _____ Date: _____