



Proteomics International

REQUEST FORM 020

Lab Use

Project Consultation

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ISO/IEC 17025

SECTION A

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

Note: For Credit Cards/other online payments refer to last page

Sample Information - Please complete details on all pages and sign the last page	
Source: (e.g. gel band, freeze-dried or aqueous sample)	Buffer composition for liquid or freeze-dried sample:
Organism: (e.g. Human, Rat, <i>E. coli</i> , Wheat)	Amount of protein in sample(s): Purity of sample(s): Volume of liquid sample(s):
Storage condition of sample: (-80°C, -20°C, 2 – 8°C, Room temperature)	Chemicals used for reduction & alkylation, if any:
No. of Samples (n):	

Proteomics Analysis price guide as of January 2024:

Price (Ex. GST)

Service 020 - Project Consultation	Rates from US\$100 / hour	Rates from A\$150 / hour	<input type="checkbox"/> USD Enquire	<input type="checkbox"/> AUD Enquire

Project Description: Provide a brief description of the planned project

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Lab use only:			
Date Received + Initial:		Instrument use:	
Sample Second Checked by:		Spot set:	
Storage Location:		MS data analysis + Operator:	
Date Processed + Operator:		Report Reference:	
Special Considerations:		Report Checked by:	
		Workflow Checked by:	

SECTION B

For each sample please provide the following information if known:

No.	Sample Details		Lab use only		
	Sample Identification	Molecular mass (kDa)	PI number	Checked by	Comments
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

(Please append extra table if required)

Comments:

For online credit card payment, please tick here:



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/analytical-services/terms-and-conditions/>).
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.
4. For students, please ensure supervisor signs this form.

Note: Please be aware that samples are destroyed by analysis and cannot be returned.

Authorised Signature _____

Date: _____