



**Proteomics International**

# REQUEST FORM 030

## Biosimilars | Biologics

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ISO/IEC 17025

### SECTION A

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

**Note:** For Credit Cards/other online payments refer to page 3

Sample Information - Please complete details on all pages & sign page 3	
<b>Source:</b> (e.g. freeze-dried or aqueous sample)	<b>Buffer composition for liquid or freeze-dried sample:</b>
<b>Organism:</b> (e.g. Human, Rat, <i>E. coli</i> , Wheat)	<b>Purity of sample(s):</b>  <b>Volume of liquid sample(s):</b>
<b>No. of Samples (n):</b>	<b>Any other treatments or chemicals present including amounts/final concentration:</b> (e.g. acetone precipitation, sucrose, etc.)

Lab use only:			
Date Received + Initial:		Project Overview File No.:	
Sample Second Checked by:		Study Plan File. No.:	
Storage Location:		Workflow Checked by:	
Special Considerations:			

## SECTION B

### Sample information continued

<b>Storage condition of sample:</b> (-80°C, -20°C, 2 – 8°C, Room temperature)	
<b>Protein sequence or SwissProt reference</b>	
<b>Disulphide Bridge Information</b> No. Disulphide bridges Postulated bridges No. Free Cys	
<b>Glycosylation</b> Sites of N and O linked glycosylation	
<b>Sample clean-up required</b> (e.g. HPLC, desalting, etc)	<b>FOR LAB USE ONLY</b>

## SECTION C

**For each sample please provide the following information if known:**

No.	Sample Details	Molecule		Lab use only		
	Sample Identification	Molecular mass (kDa)	Sample amount (mg)	PI number	Checked by	Comments
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

(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:** \_\_\_\_\_

<b>FOR LAB USE ONLY</b>						
<b>PI Number:</b>						
<b>Quotation:</b>						
<b>Study Plan (attach statement of work):</b>						
Experiment/Services (Tick box to indicate services provided)		Prep #	Exp. Date	Spot/Run set	Data Analysis/File	Report
Sample clean up						
Peptide Mapping						
Disulphide bridge analysis						
N-Terminal sequencing by MS						
C-terminal sequencing by MS						
Intact molecular mass						
Amino acid analysis						
CD analysis						
Fluorescence spectra						
Protein concentration						
SV-AUC						
HPLC profile						
SEC profile						
Others (please specify)						

Comments: