

REQUEST FORM 030

Biosimilars | Biologics



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SECTION A

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

Sample Information - Please complete details on all pages & sign page 3			
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):		
No. of Samples (n):	Any other treatments or chemicals present including amounts/final concentration: (e.g. acetone precipitation, sucrose, etc.)		

Lab use only:

Prep Received:	Plate No./Spot set:
Processed/Operator:	MS data analysis/Operator:
QC No:	Report Reference:
Enzyme Lot No:	Checked Workflow:
Special Considerations:	Checked Report:

SECTION B

Sample information continued

Proteomics International

Sample storage	
(-80°C,-20°C, 4°C)	
Protein sequence or SwissProt reference	
Disulphide Bridge Information	
No. Disulphide bridges	
Postulated bridges	
No. Free Cys	
Glycosylation	
Sites of N and O linked	
glycosylation	
Sample clean-up required	
(e.g. HPLC, desalting, etc)	
	FOR LAB USE ONLY

SECTION C

For each sample please provide the following information if known:

	Sample Details		Lab use only			
No.	Sample Identification	Molecular mass (kDa)	PI number	Spot No.	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:

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: