

Proteomics Resource Centre - Sample Submission Form

Name:

Address:

Supervisor:

Institute/Dept.:

Cost Center/Credit Card Info.:

Tel. & Fax:

Email:

Type of analysis requested:
(please circle)

LC-MS/MS Analysis
LTQ linear ion trap mass spectrometer

OR

LC-MS/MS Analysis
QSTAR quadrupole-TOF mass spectrometer

In-gel digestion required:

Yes

No*

De-salting required:

Yes

No

Phosphopeptide enrichment required:

Yes

No

*Samples (10-45 μ L) must be provided in 5% formic acid.

Sample name/number	Taxonomy (e.g. Human)	Mass (kDa)	Stain used

I have read the Guidelines for Sample Submission

(Signature)

(Date)

Additional Sample Information: