

Sample Identification Form – Kendrick Labs Inc

Your Shipping Information

Name(s) _____
 _____ Date _____
 Institution _____
 Address _____

 Phone _____
 Fax _____
 Email _____

Your Billing Information

Institution _____
 Address _____

 Price Quote Invoice # _____
Credit Card # _____
 Name on Card _____
 Exp _____ Security # (3 digit # on back) _____
 Or **PO#** _____

(PO# or CC# required for return of results)

Sample Composition - Briefly describe your samples (origin, species, etc. Continue on back if necessary):

#	Your Sample #	Sample Identification and Description	µl enclosed	protein µg/µl	protein dpm/µl	µl* load
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

*Note: Volume loaded must be ≤ 50 µl for standard and ≤ 150 µl for large format 2D gels

1. The protein concentration of the sample(s) was determined by the method of _____
2. The sample consists Complex mixture Few Purified
of (check one): Of polypeptides _____ Polypeptides _____ Polypeptide _____ Unknown _____
3. What is the composition of the buffer you used to dissolve the sample? _____

4. Is sample preparation necessary? _____
5. Is the sample radioactive? _____
What are the total dpm for all enclosed sample(s)? _____
6. What is the MW range of interest? _____ What slab gel % acrylamide is desired? _____
(Note: our standard 10% acrylamide slab gel will resolve from **14 to 220** kilodaltons.)

(continued on opposite side)

Check appropriate items below

2D Procedures		
<input type="checkbox"/> 2D Standard Size (2D-ES-1)	<input type="checkbox"/> Duplicate Large Gels (LF-Dup)	<input type="checkbox"/> Fluorescent Densitometry (2D-ES-13A)
<input type="checkbox"/> Duplicate Std. Gels (2D-dup)	<input type="checkbox"/> CA/CPK PI markers (2D-ES-7)	<input type="checkbox"/> Quantitative Densitometry (2D-ES-13B)
<input type="checkbox"/> 2D w/ Peptide Slab (2D-ES-2)	<input type="checkbox"/> Manual Comparison (2D-ES-9)	<input type="checkbox"/> Electronic Photos (2D-ES-14)
<input type="checkbox"/> Native 2D Gels (2D-ES-3)	<input type="checkbox"/> Computer Comparison (2D-ES-10)	<input type="checkbox"/> Mass Spec. LC/MS/MS (2D-ES-18)
<input type="checkbox"/> No Sulphydral (2D-ES-4)	<input type="checkbox"/> 2D Quant. of 2D Spots (2D-ES-12)	<input type="checkbox"/> Identification of PTM (2D-ES-18-PTM)
<input type="checkbox"/> 2D Large Format (2D-ES-5)	<input type="checkbox"/> Laser Densitometry (2D-ES-13)	<input type="checkbox"/> Spot Cutout for MS (2D-ES-19)
Host Cell Protein Analysis		
<input type="checkbox"/> 1D HCP Antibody (1D-HCP-1)	<input type="checkbox"/> Whole Cell Lysate HCP, Addt'l Abs (HCP-WCL-SFA, LFA)	<input type="checkbox"/> Product Spot Removal (HCP-PSR-LFR)
<input type="checkbox"/> 1D HCP Addt'l Antibody (1D-HCP-1A)	<input type="checkbox"/> Drug Substance HCP Analysis (HCP-DS-SF, LF)	<input type="checkbox"/> Product Spot Removal of Addt'l HCP Ab (HCP-PSR-LFRA)
<input type="checkbox"/> Whole Cell Lysate HCP Analysis (HCP-WCL-SF, LF)	<input type="checkbox"/> Drug Substance HCP, Addt'l Abs (HCP-DS-SFA, LFA)	<input type="checkbox"/> Run Documentation for HCP Analysis (GTRK-1)
1D Procedures		
<input type="checkbox"/> SDS PAGE (1D-ES-1)	<input type="checkbox"/> Peptide Slab Gels (1D-ES-5)	Assays for Food Proteins _____ (write in # of assay from table on p. 13)
<input type="checkbox"/> 1D Quantification (1D-ES-2)	<input type="checkbox"/> Blue Native, 1D Only (1D-BN-PAGE)	
<input type="checkbox"/> MW Distribution (1D-ES-3)	<input type="checkbox"/> 1D Know Protein Det. (1D-PKG-1)	
<input type="checkbox"/> Double Thick Gels (1D-ES-4)	<input type="checkbox"/> Isoelectric Focusing (1D-IEF)	
Staining and Drying Procedures		
<input type="checkbox"/> Coomassie Blue Stain (STP-1)	<input type="checkbox"/> Sypro Ruby Stain (STP-4)	<input type="checkbox"/> Paper Drying (STP-9)
<input type="checkbox"/> Silver Stain (STP-2)	<input type="checkbox"/> CyDye for DIGE (STP-5)	<input type="checkbox"/> Return of Wet Gels (STP-10)
<input type="checkbox"/> Special Silver Stain for MS (STP-3)	<input type="checkbox"/> Transparency Drying (STP-8)	
Radioactivity Procedures		
<input type="checkbox"/> Autoradiography (RP-1)	<input type="checkbox"/> Fluorography (RP-3)	<input type="checkbox"/> Radionuclide Disposal Fee (RP-6)
<input type="checkbox"/> Enhance Treatment (RP-2)	<input type="checkbox"/> ¹⁴ C MW Markers (RP-4)	
Blotting Procedures		
<input type="checkbox"/> PVDF Transblotting (BP-1)	<input type="checkbox"/> Pre-Stained MW Markers (BP-4)	<input type="checkbox"/> pSer/Thr WB Pkg (BP-8SF, 8LF)
<input type="checkbox"/> PVDF CB Staining (BP-2)	<input type="checkbox"/> Western Blotting (BP-6SF, 6LF)	<input type="checkbox"/> pSer <i>or</i> pThr WB Pkg (BP-9SF, 9LF)
<input type="checkbox"/> Nitrocellulose Transblotting (BP-3)	<input type="checkbox"/> pTyr WB Pkg (BP-7SF, 7LF)	<input type="checkbox"/> Acetyl-Lys WB Pkg (BP-10SF, 10LF)
Sample Preparation, Procedures, Mailing Kit, Misc.		
<input type="checkbox"/> BCA Protein Determination (SP-1)	<input type="checkbox"/> Lyophilization (SP-6)	<input type="checkbox"/> cGMP Analysis (cGMP-1)
<input type="checkbox"/> Bradford Protein Determination (SP-1B)	<input type="checkbox"/> TCA Precipitation (SP-7)	<input type="checkbox"/> Consulting (Con-1)
<input type="checkbox"/> Combine Mult Sample Tubes (SP-2)	<input type="checkbox"/> TCA/Acetone Precipitation (SP-8)	<input type="checkbox"/> Custom Lit Search (LS-1)
<input type="checkbox"/> Ethanol Precipitation (SP-3)	<input type="checkbox"/> Custom Sample Preparation (SP-9)	<input type="checkbox"/> pTyr/TK WB overlay (PTO-1)
<input type="checkbox"/> Homogenization (SP-4)	<input type="checkbox"/> Albumin/IgG Removal (SP-10)	<input type="checkbox"/> Archival of reports (ARCHIVE-1)
<input type="checkbox"/> Microdialysis (SP-5)	<input type="checkbox"/> Mailing Kit (MK-1)	

COMMENTS, REQUESTS, OR SPECIAL INSTRUCTIONS: