

N-TERMINAL SEQUENCING

REQUEST FORM

Send sample to:

N-Terminal Sequencing
Australian Proteome Analysis Facility
Level 4, Building F7B, Research Park Drive
Macquarie University
Sydney, NSW 2109

Contact Details:

N-Terminal Sequencing
Ph: +61 2 9850 6201
Fax: +61 2 9850 6200
Email: edman@proteome.org.au
Website: www.proteome.org.au



Customer Details

Contact Name: _____ Organisation: _____
Phone: _____ Billing Address: _____
Fax: _____
Email: _____
Principal Investigator: _____ Purchase Order Number: _____

Sample Details

Sample Name: _____ If the sample is a liquid, please state buffer and salt concentrations:
Sample form (please select): solid / liquid / PDVF/gel
Approximate MW: _____ Special handling of sample: _____
Quantity of Protein _____ pmole _____ ug
Estimated purity (%): _____ Reason for sequence analysis
Species: _____ Protein identification
Method of purification _____ N-Terminal sequence identification
Cys reduction/alkylation reagents used: _____ Other _____

Nature of Service	Fee*	Number	Cost (\$A)
Sequencing setup fee [†] (per sample)	\$190		
Edman sequencing fee per amino acid	\$33		
Cys reduction/alkylation	\$150		
Elution of protein from gel prior to analysis	\$65		
Sample desalting	\$65		
Total Cost			

† Full fees now apply even if we are unable to obtain N-terminal sequence data.

* Prices quoted are exclusive of GST (applicable only to samples originating within Australia)

Samples are placed in a queue on receipt with the completed form. For other services and urgent samples, please contact us via e-mail (edman@proteome.org.au). Reports will be sent in electronic format as PDF files.

I agree to the APAF terms and conditions and the charges listed above and I have prepared the sample(s) according to APAF's guidelines (available on APAF website).

I also agree that APAF will be notified of all publications containing the results from this work. It is requested that any publications acknowledge the contribution of APAF staff and include reference to the research has being "facilitated by access to the Australian Proteome Analysis Facility supported under the Australian Government's National Collaborative Research Infrastructure Strategy (NCRIS)".

Print Name _____ Sign Name _____ Date ____ / ____ / ____

Payment Details

We would appreciate prior payment for samples under \$2,000. Please provide credit details:

Visa MasterCard _____

Expiry ____ / ____ Name on the Card: _____ Signature: _____

Purchase order # _____ For samples over \$2,000 payment must be received within 14 days of receipt of invoice.

APAF Office Use Only: Sample receiving date _____ Project Code: _____

Responsible by: _____ File name: _____ Date of completion: _____