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N-terminal Sequencing Sample Submission Form

Name				Date	
				Date	
Company / Dept.					
Street address					
Email					
Phone				Fax	
D.III. D. (
Billing Reference (for customer's accounting)					
Billing Address (if different from street address)					
VAT ID (required from EU					
customers, except Germany)					
Reference					
(for further communication) Sample origin					
(species, genetic source/host)					
Sample format [purified proteins]	PVDF membrane	□ lyophilised	☐ in solution		
Sample additives (e.g. buffer, salts, detergents)					
Stain used					
	Coomassie	Ponceau S	Sulforhodamine	other, specify	
No.	Sample Label (as labelled on vial)	Conc./Qty.	Approx. MW	No. of steps	Description
1	(as labelled on vial)	(specify units)	[kDa]		
2					
3					
4					
5					
6					
Additional comments					
Shipping (date/conditions)					
Completion to (express surcharge may apply)	Standard 10-15 business days	Express	☐ Next Day, by prior arrangement		
Purchase order	. 5 TO Business days	o o odomicoo daya	prior arrangement		
(date and authorised signature)					

- Please notify Proteome Factory when shipping your samples.
- Express service results in surcharges