

# JHMI Synthesis & Sequencing Facility

## Amino Acid Sequencing Order Form

Requested by: \_\_\_\_\_ Email address: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_ Room/BLdg.: \_\_\_\_\_

Department: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

SAP #: \_\_\_\_\_ Purchase Order No.: \_\_\_\_\_

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Sequence(s) identification: \_\_\_\_\_

How far do you want to sequence?: \_\_\_\_\_

Amount of Protein/Peptide provided? \_\_\_\_\_ micrograms OR picomoles

Approximate Molecular Weight \_\_\_\_\_ Kd

Evidence of Purity: \_\_\_\_\_

Is this sample radioactive?  Yes **OR**  No

If so, what and how much? \_\_\_\_\_

Does this sample contain any modified or unusual amino acids?  Yes **OR**  No

If so, what are they? \_\_\_\_\_

If the sample is supplied in liquid, please provide the exact composition of all the components in the solvent in which the sample is dissolved:

\_\_\_\_\_

If sample is supplied lyophilized, what do you recommend to reconstitute it?

\_\_\_\_\_