



## PROTEIN SEQUENCING SAMPLE SUBMISSION FORM

LABORATORY ID#: \_\_\_\_\_

Date: \_\_\_\_\_

PI Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Fund #: \_\_\_\_\_

Objective: \_\_\_\_\_

Sample Preparation:

Quantitation method:

SAMPLE NAME	AMOUNT	MASS(Da)	#CYCLES
1.			
2.			
3.			
4.			
5.			
6.			