Please fill out form as completely as possible; multiple pages are fine. Contact MSL staff at ans@ku.edu with questions.

|  |  |
| --- | --- |
| Date Submitted |  |
| Submitter Name |  |
| Submitter email |  |
| Notebook reference  |  |
| PI name (and institution if other than KU) |  |
| PI email |  |

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| --- |
| Describe the experiment goals (i.e., what results are you expecting to obtain): |
|   |

**Sample Information (if submitting more than two samples, please add more numbers and fill out each section for each sample submitted)**

|  |  |
| --- | --- |
| Sample(s) to be returned? | [ ] Yes [ ] No  |
| Names of sample(s) submitted: as labelled on the tube | 1) 2)  |
| Sample volume(s) | 1) 2)  |
| Sample concentration(s) | 1) 2)  |
| Amino Acid Sequence(s) | 1) 2)  |
| Please indicate buffer/solvent that the sample was delivered in: | 1) 2)  |
| Have we run this sample(s) before? |  [ ] Yes [ ] NoDate or file name of previous sample(s) run: |
| Does your sample(s) have known solubility issues? | [ ] Yes [ ] No [ ] Unknown |
| Does your sample(s) contain disulfide bonds? | [ ] Yes [ ] No [ ] Unknown |
| Does your buffer contain a reducing reagent (DTT, BME, TCEP, etc)? | [ ] Yes [ ] No |
| Does your sample(s) contain other PTM’s? | [ ] Yes [ ] No [ ] Unknown |
| Please detail known/suspected PTMs or solubility issues: |  |
| Purification status of the sample (mark all that apply): | [ ] Affinity [ ] SEC [ ] IEX [ ] HIC [ ] other (please specify): |
| Special instructions, storage conditions, notes, or chromatographic conditions: |  |