Log No.

**Mass Spectrometry Laboratory**

**The University of Texas Health Science Center**

**Department of Biochemistry - MC 7760**

7703 Floyd Curl Drive, San Antonio, Texas 78229-3900

(210) 567-6736 | (210) 567-4159 | (210) 567-4043

 **Protein/Peptide Sample Submission Form**

P.I. Name:       Phone:       Date:

Department:       Email:

Contact name:       Email:

Phone:       Project budget:

***Sample:*** Protein(s) MW (kDa):       Peptide MW (Da):

 Sequence known?       If yes, please send sequence to pardo@uthscsa.edu or molleur@uthscsa.edu

 Possible modifications: Phosphorylation       Other

***Format (number):*** 1-D gel band(s)       2-D gel spot(s)       Stain

 Dry       Solution       Digest

 Solvent/buffer/detergents

**Addl. information*:*** (Species, tissue, cell-type, organelle, expression system, sample prep method, pull-down details)

 (List samples being submitted, corresponding tube labels and estimated quantity/concentration)

|  |
| --- |
|       |

***Analysis requested***

 Identification       MW

 Redn/alk       Alternative protease (please specify)?

 Localization of PTM

 Other

**Fee schedule:** http://www.uthscsa.edu/mass-spectrometry/fees.html

***If results from these mass spectrometric analyses are published, I agree to acknowledge the efforts of***

***the UTHSCSA Institutional Mass Spectrometry Laboratory and support from NIH grant P30 CA54174.***