

2D DIGE Preparative Gel Order Form

Orders are final after submission. * All Required Fields must be filled out before orders can be processed. Please send the completed form with your samples, or FAX to 1-510-398-1515,

	ABO Internal Use
PC:	PL:
Order:	

Cus	tomer	Info	rmat	ion

or EMAIL to support@applie	dbiomics.com	Order:					
Customer Information							
*Category	Same as 2D-DIGE Order Form (project #) If different, please complete the following information.						
*Date							
	*Contact Person		*PI (□:	Same as Contact Person)			
*Name (First Last)							
*Company/Institution							
*Department							
*Phone number							
*Email Address							
*Mailing Address							
Billing Information (Ch	eck One and fill out all corre	sponding fields)					
☐ Purchase Order: Pl	ease send a hardcopy by En	nail: ar@appliedbio	mics.com o	or Fax (1-510-398-1515)			
☐ Credit card: Please	provide the following inform	nation					
Contact person							
Phone number							
Email Address							
How did you find us: □E	mail □Search Engine □Co	nference □Referre	ed by collea	gue			
Biohazard Material (we	will not process samples if t	he following inforn	nation is no	t provided)			
⊒The samples do NOT co	ontain any biohazard material c	or radioisotopes (e.g	. ¹⁴ C, ³² P, ³⁵	S, etc.) of any kind.			
	, which is Level he appropriate procedure.	el Biohazard m	aterial. I hav	ve completely deactivated the			
Preparative Gel Info	Sample-1 (Control)	Sample	-2	Sample-3			
Gel 1							
Gel 2							



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Protein ID Information: Gel 1				
* Sample Species	☐ Human	☐ Mouse	Other	
* Total Number of Spots to Pick				
* Total Number of Spots to ID				
* List of Spots to ID / Comments				
☐ See attached file				
Protein ID Information: Gel 2				
* Sample Species	☐ Human	☐ Mouse	Other	
* Total Number of Spots to Pick				
* Total Number of Spots to ID				
* List of Spots to ID / Comments See attached file				
Please use a copy of this page for more gels	for spot picking a	ind protein ID.		
Other Services			Quantity	
☐ Extra Data Analysis (hour)				
☐ Customized Services (Please provide	a brief descripti	on)		
* Order Submitted and Agreed to by :				
-	Print	Name and Tit	le	
	Signa	ature		

By signing this form, I certify that I have read the "Terms and Conditions" at http://www.appliedbiomics.com/terms.html, and will fully comply with those terms as a condition to the services provided by Applied Biomics.