LSI Mass Spec Sample Submission Form

Lab Information:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | Lab number: |  | PI Signature: |  |
| Date: |  | Tel: |  | E-mail: |  |

Sample Information:

|  |  |
| --- | --- |
| Sample Numbers： | Species:  |
| Sample Names |

Measurement Required

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sample Type: | Protein Gel□ | protein solution□ | cell□ | tissue□ | others□ |
|  |  | Buffer composition: |
|  |  |  |  |  |  |
| Measurement Required： | Single protein identification:□ |  ID：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Map Protein Modification：□ | □Phosphorylation □Acetylation□Ubiquitination □Methylation□Lactylation □others\_\_\_\_\_\_\_\_\_\_ |
|  | Protein mixture identification□ |  |
|  | Binding Protein□ |  ID：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Quantitative Proteomics□ |  |
|  | Quantitative Phosphomics□ |  |
| Other Experiments: |
| Please contact us for discussion. |