**SAMPLE SUBMISSION FORM**

**CUSTOMER INFORMATION**

| Name : |
| --- |
| **Address:** |
| **Phone:** |
| **Email:** |

**PEPTIDE INFORMATION ( We will provide you molecular weights verified with Mass data )**

| # | **Peptide Sequence** | **Modification** | **Amount (mg )** |
| --- | --- | --- | --- |
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**OTHER INSTRUCTION**

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**AUTHORIZATION SIGNATURE DATE**

| For Office Use Only | Comment |  |
| --- | --- | --- |
| **Received By** |  | Date |
| **Forwarded to** |  | Date |