**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 |