

**Intact Genomics, Inc. Sequencing Services
Sample Submission Form**

Date: _____

Customer Details:

Customer Name: _____ Institution/Company Name: _____

Phone: _____ Email Address: _____

Sample Information:

Name of Organism: _____

Input Nucleic Acid: gDNA cDNA total RNA mRNA ribo-Reduced RNA small RNA

Other (provide explanation of content)

If Intact Genomics is extracting DNA from your samples, please provide the answer Q1 and Q2.

Q1. Sample Details:

Animals plants insects fungi bacteria plasmids fosmid BACs

Q2. Source:

Tissue Cells

Other information:

Library Type:

DNA: gDNA gDNA low input exome

RNA: Total RNA mRNA ribo-reduced RNA stranded mRNA stranded ribo-reduced RNA

smallRNA

Amplicon: 16s (v3-v4) ITS (ITS1-2) 18s index only custom amplicon _____

Other (discuss with facility before submitting)

QC only (library prepared by customer)

Kit used to make libraries:

Sample Buffer: Nuclease-free water 10 mM Tris-HCL pH 8.0 Other: Please explain:

Indexing:

samples per lane: _____

Sequencing Options on Illumina® MiSeq:

1x50 2x75 2x150 2x250 2x300

Sample Information:

Submit samples in 1.5 mL single tubes or a plate, labeled with the sample name, Customer's last name, and date. Please provide the following information in an Excel file, print out and email to us:

Sample Name	Conc. (ng/μl)	A260/A280	Volume (μl)	Total (μg)	Index

If applicable, list the custom Primer (name): _____

Attach the gel image, or send via email to: Sales@intactgenomics.com

Bioinformatics Options:

- Intact Genomics, Inc.
 Collaborator: Name _____
 By Submitting Customer

Additional Comments:

For Use by Intact Genomics Only:

Submission No. _____

GS Protocol Run # _____ Run Date ____/____/____ Bill Date ____/____/____