**UNL Metabolomics Core**

**Project Submission Form**

|  |  |  |
| --- | --- | --- |
| Submitted by:  | Phone:  | Email:  |
| Principal Investigator:  | Phone:  | Email:  |
| Name of Department:  | Cost Object:  |
| Organization:  | Purchase Order # |

**Sample Concerns (underline appropriate):**

**Sensitivities AIR WATER LIGHT**

**Dangers Carcinogen Mutagen BIOHAZARD**

**Number of Replicates\_\_\_\_\_\_??\_\_\_\_\_\_**

 **Return Samples on Completion Discard Samples on Completion**

|  |
| --- |
| **Other Requested Data or Sample Handling Details:** |
|  |
|  |

=====================================================================================

**FOR USE BY FACILITY PERSONNEL:**

**Date Completed: Completed By:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Description** | **Time/Qty.** | **Cost$/Unit** | **Total$** |
| NMR Tubes:  | ?? tubes |  |  |
| Buffer/salts: D2O phosphate buffer  | 32.4 mL |  |  |
| NMR Run Time (hr): | ?? | 8.00 |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  **TOTAL: ??** |
| RBC or UNMC rebate: ?? |

***Please complete and submit with Samples.***