

# ACRF Biomolecular Resource Facility (the BRF)

## John Curtin School of Medical Research

BRF Phone: +61 2 6125 4326  
 BRF Email: [brf@anu.edu.au](mailto:brf@anu.edu.au)  
 BRF Fax: +61 2 6125 9533  
 Web: [www.brf.anu.edu.au](http://www.brf.anu.edu.au)

GDU Phone: +61 2 61259289  
 GDU Email: [jcsmr.gdu@anu.edu.au](mailto:jcsmr.gdu@anu.edu.au)

Sample Drop-Off Address:  
 L2, Building 131, Garran Road  
 Australian National University  
 Post: GPO Box 334  
 Canberra ACT 2601

Please print this form and complete all information requested. Contact us if unsure. This form **MUST** be signed by PI / Lab Head. Bring it to the BRF with your samples.

### 5500xl SOLiD Order Form

#### Part 1: Contact Information

Date:	
Customer name:	
Customer address:	
Phone (lab):	
Phone (mobile):	
Email:	
PI (or Lab Head) name:	
PI (or Lab Head) email:	
PI (or Lab Head) signature: By signing, you acknowledge and accept BRF charges, and terms and conditions.	

#### Part 2: Billing Information

<b>ANU Customers:</b> Please provide ANU account code.	
<b>Non ANU Customers:</b> A tax invoice will be emailed to the PI (or Lab Head) unless alternative information is provided here.	

#### Part 3: Output

Please choose a data option	
<input type="checkbox"/>	Analysed by GDU  (Please contact <a href="mailto:jcsmr.gdu@anu.edu.au">jcsmr.gdu@anu.edu.au</a> or 6125 9289 for a discussion of method, and for pricing.)
<input type="checkbox"/>	Purchase 2TB hard drive from BRF (\$170)
<input type="checkbox"/>	Supply own hard drive

## Part 4: Sample and Sequence Information

<b>A.</b>	<b>Description of the experiment</b>

<b>B.</b>	<b>Sample Information. Please change this table to suit your experimental design.</b>							
Sample Submission Date:								
Lanes required:	<input type="checkbox"/> 1 Lane	<input type="checkbox"/> 2 lanes	<input type="checkbox"/> 3 lanes	<input type="checkbox"/> 4 lanes	<input type="checkbox"/> 5 lanes	<input type="checkbox"/> 6 lanes		
	Sample 1	Sample 2	Sample 3	Sample 4	Sample 5	Sample 6	Sample 7	Sample 8
Sample Name								
Sample origin (species/tissue)								
Sample type (DNA, RNA, etc)								
Reference genome (eg, Refseq Accession No.)								
Sample volume $\mu\text{L}$								
Bioanalyser RIN (for RNA samples)								
OD260/280								
OD260/230								
Concentration (ng/ $\mu\text{L}$ )								
Library type								
Barcoding required? Yes/No.								
Sequencing type								

## Part 5: Sample Requirements

Please supply the following information with your samples:	Total RNA and mRNA samples
	The bioanalyser results
	For MicroRNA, please enquire with the BRF
DNA Samples	Genomic: Please provide a gel picture of 100ng of DNA run on a 0.7% agarose gel at 100V for one hour with DNA ladder on it.
	We strongly recommend use of a fluorescence based quantitation method such as Quant-IT picogreen over UV absorbance quantitation.