

ACRF Biomolecular Resource Facility

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Instructions to complete this form:
• Print & complete both pages and bring to the BRF with your samples.

GS FLX 454 Order Form

Part 1: Contact Information

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 acknowledged and accept BRF charges, and terms and conditions.	

Part 2: Billing Information

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

Part 3: Project Information

A.	Description of the experiment

B.	Sample Information							
Sample submission date:								
Sample number	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)								
Ref genome (eg, Refseq accession number)								
Bioanalyser RIN (for RNA)								
OD 260/280								
OD 260/230								
Sample volume μ L								
Concentration (ng/ μ L)								
Barcoding required? Y/N If YES, please state amplicon size (nt)								
Library type (if mate-paired, indicate 3kb, 8kb or 20 kb).								

C.	Other information to be submitted with samples
Total RNA and mRNA samples	
Bioanalyser results	
For MicroRNA, please enquire with BRF.	

D.	Information for DNA Samples
Genomic: gel picture of 100ng of DNA run on a 0.7% agarose gel at 100V for 1 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.	