PACIFIC NORTHWEST Cryo-EM Center

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Mail code CL-P2M
2730 S. Moody Ave.
Portland, OR 97201

Pacific Northwest NATIONAL LABORATORY | OHSU

PNCC Sample Submission Form

version 1

User Information

PI Name:
Proposal ID:
Institution:
Contact Person:
Contact Email:

Shipping Information

Ship Date:
Carrier:
Tracking #:
☐ **Require grids back***

Important Notes

If suitable grid freezing conditions are already known, please provide details below (ie, protein concentration, volume sample, blot time, etc.):

Your sample ID/name**	# Tubes	Storage Temp.	Sample Description Buffer and Concentration Information	Concen-tration (mg/mL)	MW of protein/ complex (kDa)	Grid Type*** (Quantifoil, lacey, etc)

Total # of tubes:

* Please see the PNCC scheduling policies for more information on sample shipment and storage.

** This ID/name should uniquely identify the sample within this PNCC project. Examples may include this like: ProtAcomplex_g2, prep01-12-19_50mL_5sec, or just sampleProtA, etc.

*** Shipment should include buffers, ligands, other reagents and grid types for freezing grids.