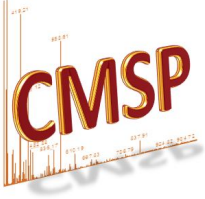


CMSP Gel Submission Form



Name: _____ X.500 (UM ID) _____

Date _____ PI _____ PI X.500 _____

Species: _____

Enzyme:

Trypsin

Other _____

Amount of Protein Loaded into Each Gel Lane:			
Lane #	_____	ug Protein	_____
Lane #	_____	ug Protein	_____
Lane #	_____	ug Protein	_____
Lane #	_____	ug Protein	_____
Lane #	_____	ug Protein	_____
Lane #	_____	ug Protein	_____
Lane #	_____	ug Protein	_____

Other Notes

GEL PROCESSING AND MARK UP:

Gel Type: _____

Protein Staining Reagent: _____

Excise gel bands/regions, place in labeled 1.5 mL Eppendorf tubes. On your gel image, draw boxes around the gel bands that were excised or mark gel band with arrows; label the gel regions with your sample names, then insert gel image below. Ensure sample names on the labeled gel image match the names on tubes.

(See example labeled gel image on this website: <http://cbs.umn.edu/cmSP/sample-submission>, click on 'Example Gel Image'.)

Insert Gel Image here, click in box, insert gel image

Image Field