

## MyOmicsDx, Inc. Genomics Sample Submission Form for NGS Services

Please fill this form as much as you can and ship it together with your sample(s) to us

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_ Order/Quote No: \_\_\_\_\_

Email: \_\_\_\_\_ Phone No: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

**Please label tubes clearly with: (1) Today's Date (2) Your Last Name (3) Sample Name**

Sample Name(s): \_\_\_\_\_

Total Number: \_\_\_\_\_

Size Range: \_\_\_\_\_ Amount (ng, pmol): \_\_\_\_\_

Species\*: \_\_\_\_\_ Volume (ul): \_\_\_\_\_

Source\*: \_\_\_\_\_ Concentration (uM): \_\_\_\_\_

You must provide Species (human, mouse, zebrafish etc... ..) and Source (cell lysate, tissue lysate, plasma, serum, etc... ..) information to start a project.

Above sample amounts are based on what assay? \_\_\_\_\_

Buffer components of sample (or dried down from what buffer): \_\_\_\_\_

Sample types:            FFPE            DNA            Plasma/Serum            Cell Line            Tissue

Other: \_\_\_\_\_

What do you want to know? \_\_\_\_\_

Other Comments? \_\_\_\_\_

For further details, please visit us at [www. MyOmicsDx.com](http://www.MyOmicsDx.com)