

# Project Submission Form

## Instructions

1. Fill out the appropriate information on each of the following pages.
2. Schedule an appointment to discuss your project:

Structural services contact Dr. Janna Kiselar at (216) 368-0979 [Janna.Kiselar@case.edu](mailto:Janna.Kiselar@case.edu)  
Expression Proteomics Danie Schlatzer at (216) 368-4014 or [Daniella.Schlatzer@case.edu](mailto:Daniella.Schlatzer@case.edu)  
General questions regarding services and pricing Katy Lundberg at [Katy@case.edu](mailto:Katy@case.edu)

3. Bring samples and submission form to:

Case Center for Proteomics  
CWRU, School of Medicine  
2109 Adelbert Rd. BRB 947  
Cleveland, OH 44106-4988  
(216) 368-0291

### SAMPLE DETAILS

(Required for sample processing)

- Cell Pellet/ Tissue
  
- Protein in solution: Specify concentration of protein and molarity of other constituents (salts, buffers, etc) \_\_\_\_\_
  
- Band: \_\_\_\_\_
  - Sypro or silver stained
  - Coomassie stained
  
- Other: (please specify)  
Genus and species of source organism: \_\_\_\_\_
  
- Additional Comments: \_\_\_\_\_

**PLEASE NOTE: Case Center for Proteomics CANNOT ACCEPT RADIOACTIVE  
or HAZARDOUS MATERIALS**

### PROJECT CONTACT INFORMATION

**Project Title:** \_\_\_\_\_

**Investigator Name:** \_\_\_\_\_ **CCP Project ID:**

**Department / Company:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_

**Address:**

Street: \_\_\_\_\_

Building Location \_\_\_\_\_

City/ State/ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

- CFAR
- CTSC
- Cancer Center

### BILLING INFORMATION

Billing contact:

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Billing Address (if different from above):

Street: \_\_\_\_\_ City/ State/ Zip Code: \_\_\_\_\_

### ACCEPTANCE OF TERMS

The information provided in the Sample Submission Form is true to my knowledge

Client Signature \_\_\_\_\_ Date \_\_\_\_\_

CCP Representative \_\_\_\_\_ Date \_\_\_\_\_

**TERMS AND CONDITIONS OF SERVICES**  
**Case Western Reserve University School of Medicine's Case Center for Proteomics**  
**Clients Who Are Case Faculty or Employees**

**1. Governing Terms And Scope.** These terms and conditions (hereinafter "Terms") govern the providing of protein analytical and other services ("Services") by Case Center for Proteomics ("CCP") for you (the "Client"). These terms may only be modified by authorized representatives of CCP and the Client.

**2. Services.** Client shall designate a representative for receipt of communications under this Agreement (the "Designated Representative"). The Designated Representative shall fill out and sign a sample submission form, which when signed by an authorized CCPB representative will constitute acceptance of terms of the agreement, including these terms of service. Upon completion of the project, the test results shall be delivered to the Designated Representative. All services shall be performed at, and in accordance with CCPB's then current rates, terms and policies. Such rates, terms and policies are subject to change, unless CCP provides a quotation for specific work and such work is accepted by the client and the work is scheduled within the quotation validity period. Copies of current applicable rates, terms and policies will be posted on the CCP website. (<http://casemed.case.edu/proteomics/>)

**3. Specimens.** Client shall submit all specimens or materials for analysis, including gel plugs, cells and tissue samples ("Specimens") in compliance with applicable import, export, customs and other laws and regulations. **CLIENT SHALL NOT SUBMIT SPECIMENS WHICH ARE RADIOACTIVE, WHICH CONTAIN LIVE BIOLOGICAL AGENTS OR WHICH OTHERWISE PRESENT ANY HEALTH OR ENVIRONMENTAL RISKS OR WHICH COULD CAUSE DIRECT OR INDIRECT DAMAGE OR HARM TO CCP PERSONNEL OR PROPERTY. CLIENT SHALL NOT SUBMIT SPECIMENS WHICH ARE TRANSMITTED WITH ANY IDENTIFIABLE PROTECTED HEALTH INFORMATION (PHI) AS DEFINED BY HIPAA REGULATIONS.**

**4. Handling of Specimens.** All specimens and materials shall be submitted in accordance with the CCP guidelines in Section 3 above. CCPB shall not be responsible for lost or contaminated materials.

**5. Pricing and Payment.** All orders shall be subject to acceptance by CCP. Prices are in U.S. dollars. CCP will invoice Clients monthly using the speedtype provided on this form via cross billing.

**6. Warranties.** CCPB agrees to perform all services in manner consistent with the provision of similar services by qualified organizations in Northeast Ohio. CCP shall endeavor to perform all tests within the time period indicated but shall not be liable for failure to meet such period. CCP shall not be responsible for Client's use of or inability to use the test or project results.