

Biacore Molecular Interaction Core Facility  
Lombardi Comprehensive Cancer Center

**Sample Submission Form**

Principle Investigator's Name: \_\_\_\_\_ Department: \_\_\_\_\_

Researcher's Building and Room Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Account Number to be Charged: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Samples:

Analyte: \_\_\_\_\_ Molecular Weight: \_\_\_\_\_ pI: \_\_\_\_\_

Ligand: \_\_\_\_\_ Molecular Weight: \_\_\_\_\_ pI: \_\_\_\_\_

Expected Valency of the Interaction (Analyte/Ligand):

Chip:

CM5  CM4  CM3  C1  SA  HPA  L1  NTA

Running Buffer:

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

Experimental Set-up:

Direct Binding  Competition  Kinetic Analysis

<b>Biacore 1000 user charges*</b>				
	LCCC	GU	Non-GU	
			Academic	For Profit
Set up Fee	\$300	\$400	\$600	\$800
Instrument Time	\$10/hour	\$15/hour	\$30/hour	\$40/hour

\* If they are not provided by the user, cost of chips, analytes, and ligands will be charged to users account.