Quotation Request Form

THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

MOLECULAR BIOLOGY CORE

Dept of Surgery/Cardiac division

MBClab@osumc.edu

1. Contact Information

Name*:	
Title (Position):	
Institution/Company:	
Address:	
E-mail* / Telephone:	

* Please describe your mutagenesis (Section 2-1) or subcloning (Section 2-2) project.

2-1. Request of mutagenesis
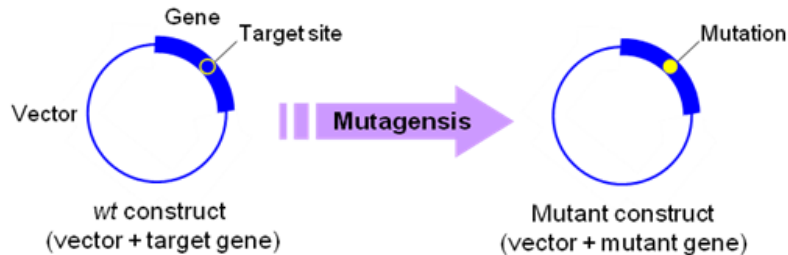
Mutagenesis	☐ Substitution ☐ Deletion ☐ Insertion ☐ Chimeragenesis ☐ Multiple-site mutagenesis ☐ Random mutagenesis
Quantity of mutants	I want to generate total ( ) mutant constructs.
Sequencing analysis	☐ Basic sequencing to confirm target mutation (free up to 1.0 kb sequencing) ☐ Full-length sequencing of gene insert : Free 1.0 kb, $25/extra 800 bp sequencing for analysis of at least 3 colonies
Information of *wt* construct	☐ Construct name: (Size: kb) ☐ Bacterial selection marker: Ampicilin, kanamycin, or other _____ ☐ Gene name or GenBank Accession No:

Vector for mutant gene	☐ Original construct ☐ New customer's vector: _____
Target mutations	**Examples of description** 1. Substitution: `AAATTTGCGAAATTT` → `AAATTTcgcAAATTT` 2. Deletion: `AAATTTGCGAAATTT` → `AAATTT___AAATTT` 3. Insertion: `AAATTTGCGAAATTT` → `AAATTTGaaaCGAAATTT`
	Please describe your mutagenesis plan or target mutations. 1. 2. 3. 4. 5.

➔ Or please send us *wt* construct and mutagenesis information by e-mail. We will provide a quote soon.

2-2. Request of subcloning

Subcloning method	☐ PCR-subcloning ☐ Gene synthesis and cloning in a vector
Quantity of subcloning	I want to generate total ( ) subclone constructs.
Sequencing analysis	☐ Basic service: Free sequencing of the whole gene insert up to 3.0 kb ☐ Whole sequence confirmation for gene insert larger than 3.0 kb : Free up to 3.0 kb, $25/extra 800 bp sequencing for analysis of at least 3 colonies
➔ **For PCR subcloning**	**Information of template construct** ☐ Construct name: (Size: kb) ☐ Gene name or GenBank Accession No: (Size: kb)

	☐ Bacterial selection marker: Ampicilin, kanamycin, or other _____ **Subcloning destination vector** ☐ Vector name: (Size: kb) ☐ If commercially available, please indicate a commercial name and provider: Commercial name: Provider: ☐ Bacterial selection marker: Ampicilin, kanamycin, or other _____

➔ **For gene synthesis**	**The size of the gene inserts to be synthesized**
	
	  1. _____ bp
	
	  2. _____ bp
	
	  3. _____ bp
	
	  4. _____ bp
	
	  5. _____ bp
	
	Gene property, if applicable:
	
	  ☐ GC rich ☐ Tandem repeat ☐ Inverted repeat (shRNA, LoxP, …)
	
	Codon optimization, if necessary:
	
	  ☐ No ☐ Yes (☐ E. coli ☐ Yeast ☐ Mammalian ☐ other_____)
	
	Subcloning destination vector
	
	  ☐ pUC19 or pBluescript ($90 of subcloning charge per construct)
	
	  ☐ Other customer's vector ($180 of subcloning charge per construct)
	
	For customer's vector, please describe
	
	☐ Vector name: (Size: kb)
	
	☐ If commercially available, please indicate a commercial name and provider:
	
	  Commercial name: Provider:
	
	☐ Bacterial selection marker: Ampicilin, kanamycin, or other _____

➔ Or please send us your information of gene of interest and subcloning plan by e-mail.

  We will provide a quote soon.

Comments: