



## Custom Gold Conjugation Request Form

### Customer Information

Date:	
Name:	
Company/Organization:	
Shipping address:	
Phone:	
Email address:	

### Antibody/Protein Information

Name:	
Specificity (Target):	
Antibody species:	
Isotype:	
Size (Kd):	
Concentration [mg/mL]:	
Buffer composition:	

### Conjugate Information

Gold size (nm):  20  30  40 Other: \_\_\_\_\_

Conjugate requested (OD/mL):  15  20  50

Amount of Ab/Protein to conjugated: \_\_\_\_\_ mg OR Volume of gold -conjugate desired: \_\_\_\_mL

Antibody Source:  Your supplied Ab  BioAssay Works  Other: \_\_\_\_\_

Special requirements or requests? \_\_\_\_\_

Historically, BioAssay Works has demonstrated feasibility in more than 95% of custom-conjugation projects undertaken by the company. However, inherent uncertainties in assay-component performance, sample quality, etc. mean that there can be no ironclad guarantee of success either in demonstrating feasibility or in producing a finished conjugate that meets all objectives. Accordingly, the above-described work will be undertaken on a best-efforts basis. Payment due before project initiation is non-refundable.