

Southeast Center for Integrated Metabolomics Service Request Form

Please contact amitch@ufl.edu for a quote.
 Quotes need to be signed as an agreement for cost of services.
 Please deliver or ship samples on dry ice by FEDEX overnight to:

University of Florida
 Attn: Tim Garrett
 1345 Center Drive
 Medical Science Building Room M641
 Gainesville, FL 32610

Investigator Contact Information

Date:	
PI:	Study contact:
Institution:	Institution:
Department:	Department:
Email:	Email:
Phone:	Phone:
Address:	Address:

Study Summary

Overall Project Title:		
Study Title:		
Funding Source (NIH, NSF, ADA, USDA, etc.; If NIH, what type? R01, R25, etc.):		
Hypothesis:		
Study Type (time course, drug dosage etc):		
Study Summary:		
Species:	Sample Type:	N:

Service Assays

Metabolomics	Lipidomics	Fatty Acids	Hydroxytyrosol	1C/Amino Acids	Acylcarnitines
Metformin	Polyamines	Tryptophan Metabolites	Resolvins	Other, please specify	