FRAGMENTATION INFORMATION SHEET PAGE 1

612 E. Main, Lewisville, TX 75057

Phone: 972-420-8505 | Toll Free: 1-800-227-0627

Fax: 972-420-0442

Website: www.biosyn.com Email: biosyn@biosyn.com



Researcher Name: Company Name: Phone: Fax: E-Mail:	BSI PO # Assigned:	
I. ANTIBODY INFORMATION Fields marked with (*) MUST be fil	• •	
Antibody designation (*):		
Animal species (*):		
Fragment Type (*):		
• Comments:		
II. FRAGMENTATION INFORMATION		
Has BSI fragmented this antibody for you previously?		
If yes, do you know the lot number of the fragmentation?		
Have you or someone else fragmented this antibody before?		
If yes, do you have a procedure or literature citation for the fragmentation?		
Preferred storage temperature (standard temperature is −20°C) (*):		
Extinction coefficient (EC) to be used for quantitation (standard)	rrd EC = 1.0) (*):	
Additional Information:		
III. FINAL PRODUCT INFORMATION • Final Storage Buffer (PBS is standard buffer):		
	g/ml	
Preferred Aliquot Size (*): 1 Bulk Container Aliquot Size (*):	Additional charges may be incurred	
Endotoxin Testing (*): Endpoint Non-	Endpoint	
Acceptable Endotoxin Level (sta	andard endotoxin level ≤ 10 Eu/mg) : Eu/mg	
Additional Requirements:		

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IV. IMPORTANT NOTES

- 1. To process this order, a Customer PO number must be assigned.
- 2. The minimum amount of antibody that will be fragmented is 50 mg. Approximately 3 6 mg of this total is required for the determination of fragmentation conditions.
- 3. F(ab')2 fragments cannot be produced from Mouse IgG2b.
- 4. The price quoted for a standard fragmentation includes a single chromatographic purification step. The purified antibody fragment is dialyzed into PBS (or other designated buffer), concentrated to its final specified concentration range, filtered through a 0.2 micron filter, sampled, and subsequently stored at the designated storage temperature. The resulting product is tested for purity by PAGE, and total protein by light absorbance at 280 nm.
- 5. Alternate medias, additional testing, handling, additional purity, or endotoxin requirements all require a price adjustment.

V. SHIPPING

BILL TO ADDRESS:	SHIP TO ADDRESS:	
Company:	Company:	
Attn:	Attn:	
Street:		
City, State, Zip:	City, State, Zip:	
Telephone:	Telephone:	
Customer Name/Title		
Customer Signature		

(Please return this form to fax # 972-420-0442. This form is also available at www.biosyn.com.)