

# ANTIBODY TESTING RESULTS

## Standard Reporting Template

**INSTRUCTIONS:** Please complete this form in its entirety. **Providing only a reference publication will not be accepted.**

**Please Note:** Failure to provide sufficient data to the Production Team will preclude your lab from consideration of future antibody generation projects

*All shaded text-box areas below can expand according to the text entered*

**Date:** 6-8-14

**Research Group Name:** John Rouse

**Your Name:** Ivan Munoz

**Is testing ongoing such that you are waiting for future bleeds?:** ☐ Yes ☒ No

**Antibody Name:** S586D SLX41P (50 - 250)

**Full Antigen Name:** GST-SLX41P (50 - 250) [DU 45577]

**Full Antigen Sequence** (please enter the full amino acid sequence in the shaded area below):

MSPILGYWKIKGLVQPTRLLEYLEEKYEEHLYERDEGDKWRNKKFELGL  
EFPNLPPYYIDGDVKLTQSMALIRYIADKHNMLGGCPKERAISMLEGAVL  
DIRYGVSRISYKDFETLKVDLFLSKLPEMLKMFEDRLCHKTYLNGDHVTH  
PDFMLYDALDVVLYMDPMCLDAFPKLVCFKKRIEAIQIDKYLKSSKYIA  
WPLQGWQATFGGGDHPPKSDLEVLFFQGGLGSDSRVQEYLEVRKQHRPSNA  
EFTRSNPLSLKGYGFQITAYFLKRGIRLCIRSTQNAELCVFPDRFVVCV  
SQLAFSRDLLASQNEDLTERVLHGVSDYFAECAESSLPKAKLRNALKE  
IVKRTETKSSVTSKQTRRDVETSSDSVIAEIAARRRNDGQASSPPSES  
MGQAKDSIKAAESHWGLPVQKLEKVNQTQPED

**Antigen Species** (Please indicate whether the antigen corresponds to the human/mouse/rat or other species): human

**Bleeds Tested In this Report** (Please check ALL those that apply):

**Note:** This form has check-box capability. By clicking the boxes below, the X will convey to the DSTT team those bleeds that you have tested, and for which data is included in this report.

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☐ 1 ☒ 2 ☒ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7

## SUCCESSFUL APPLICATIONS:

**Instructions:** *This form has check-box capability.* By clicking the boxes below, the **X** will convey to the DSTT team all the applications that each bleed was tested in and if it was successful.

	Immunoblot		Immunoprecipitation		Immunofluorescence	
	Tested	Successful	Tested	Successful	Tested	Successful
Bleed #1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bleed #2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bleed #3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bleed #4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bleed #5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bleed #6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bleed #7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**BEST Working Bleed(s): 2nd-3rd**

## PUBLICATIONS:

None

