**Compound Submission Form – Preclinical Pharmacology Core** (v2.1)

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| Compound ID: |
| Lot #: |
| Amount submitted: |
| MW: |
| Structure (Chemdraw preferred): |
| Physical state: |
| If in solution, solvent and concentration: |
| Purity (>95% preferred for *in vivo*): |
| Recommended storage conditions: |
| Source (synthesized in house or vendor): |
| Date submitted for testing: |
| Assays to be performed: |
| Name of person submitting: |
| Contact Email: |
| PI: |
| Project: |
| Name of scaffold if known: |
| Pharmacology Core Contact (if known): |
| ILabs Information (see <https://utsw.corefacilities.org/landing/170>)  Name of person to whom quotes and Invoices should be directed:  (Note- this person needs to have been granted the ability to approve charges up to $2000 by the Lab PI or financial admin or the lab PI or financial admin needs to be willing to respond to emails from ILabs). UTSW Lab PI automatically has account. All others go to above website and register.  COA to be used for charges associated with this project: |
| Please fill out form to the best of your abilities and deliver with compound/sample to L4.244 If providing an electronic version, send to [noelle.williams@utsouthwestern.edu](mailto:noelle.williams@utsouthwestern.edu) and Pharm Core contact if known. Thank you! |

**Pharm Core Use Only**

**Name of Person Receiving:**

**Where Stored:**

**Entered in Log (Y/N):**