

Mass Spectrometry Request Form

User Information:

Name: _____ Date: _____

Research Group: _____

Department Address: _____ E-Mail Address: _____

Sample Information:

Sample name: _____ Purity: Pure _____ Mixture _____

Source of sample: synthetic _____ natural product _____ other _____

Toxicity? Yes _____ No _____ Radioactivity? Yes _____ No _____

Sample solubility (circle): H₂O CH₃Cl CH₂Cl₂ CH₃OH CH₃CN Other: _____

Sample stability (storage requirement): _____

Sample amount (mg): _____

Molecular formula: _____

Molecular mass (Da): _____

Molecular Structure: _____

Request Analysis:

Ionization mode: EI _____ CI _____ FAB _____ ESI _____ MALDI _____

LRMS: _____ HRMS: _____

GC-MS: _____ LC-MS: _____

Comments: