REQUEST FOR MASS SPECTROMETRY SERVICE

A completed form is required for each sample submitted. Submission of this form constitutes approval for a charge to the designated account. A current schedule of fees is posted on the laboratory website.

*An updated fee schedule was made effective beginning October 1, 2015.

Name: ___________________________ Email: ___________________________ Sample designation: ___________________________

Principal Investigator: ___________________________ Speedtype: ___________________________ Date: __________

Sample Information

Structure and/or peptide sequence:

Molecular formula: ___________________________

Molecular weight: ___________________________

*For protein analysis, email an electronic copy of the full protein sequence including any tags and linker sequences.

Purity:

☐ Crude ☐ Semi-crude ☐ Pure

Solubility:

☐ CH3OH ☐ ACN ☐ H2O ☐ DCM
☐ Other: ___________________________

Avoid:

☐ Acid ☐ Base ☐ Other: ___________________________

Safety Precautions:

☐ Toxic ☐ Carcinogen ☐ Irritant ☐ Biohazard
☐ Explosive ☐ Other: ___________________________

Analysis Request

☐ HRMS ESI+* ☐ HRMS ESI-* ☐ HRMS Small molecule LCMS ☐ Intact Protein MW Determination
☐ MALDI+* ☐ MALDI-* ☐ Low resolution GCMS** ☐ Low resolution UV-Vis + LCMS**
☐ Orbitrap LCMS ☐ HXMS ☐ Other:

*Each polarity is billed independently beginning Oct 1, 2015
**Attach chromatogram, list desired gradient conditions (temperature, wavelengths, etc.) as appropriate

Samples should be submitted in small, screw-top vials with Teflon-lined caps or tightly sealed Eppendorf tubes.

Attach labeled sample vial here

Sample is in ☐ Refrigerator ☐ Freezer

For CAL use:

Filename(s):

Analysis completed:

ESI+ ESI- MALDI+ MALDI- LCMS GCMS Orbitrap

Accurate mass:

Matrix/Solvent(s):

α-CHCA SA DHB THAP CH3OH ACN CHCl3 CH2Cl2
☐ Other:

Time:

Charge: