



Request For Mass Spectrometry Service (one sample)
Mass Spectrometry Facility, University of Missouri-Columbia Department of Chemistry

Submitter's Name		Date
E-mail	Supervisor/PI	
Department	Building & room	
Sample # or identifying code		Phone

About your sample: please provide as much information as possible

Putative formula:		Exact Molar Mass:
Soluble in... H ₂ O acetone MeOH MeCN THF toluene (other)	Structure and origin/synthesis (use reverse side or attach pages if additional space is required)	
Contains salts or buffers? Na ⁺ K ⁺ NH ₄ ⁺ X ⁻ PO ₄ ³⁻ no unknown other (list)		
Stable in dilute acids? yes no unknown		
Sample handling precautions		
		PLEASE AFFIX SAMPLE HERE
If the sample is in solution, what are the solvents and approximate concentration?		

Service(s) Requested: indicate type of analysis desired by marking the box next to it
<input type="checkbox"/> Direct Infusion (ESI) MS
<input type="checkbox"/> Direct Infusion (ESI) MS/MS
<input type="checkbox"/> LC-MS (ESI)
<input type="checkbox"/> LC-MS/MS (ESI)
<input type="checkbox"/>
<input type="checkbox"/> Other (discuss with MS Facility Manager first)

Work Done On Sample (Comments And Suggestions)
Solvents used: H ₂ O MeOH MeCN Ionization and polarity: ESI + - Expected species observed? Y N Disposition of data: attached emailed

MoCode: _____

Account: _____
(6 digit PeopleSoft code)

Authorization: _____
(signature of authorizing party)