Mass Spectrometry Center

Sample Submission Form

University of Massachusetts Amherst
UMASS. Amherst

Phone: (413) 577-1528
Fax: (413) 577-1510

Submit Sample To: B-162 Conte Center
120 Governors Drive
Amherst, MA 01003

Name:	Phone:
E-mail:	FAX: FAX Results? Y / N (Additional charges will apply)
P.I./Advisor:	UMass SpeedType #
Department:	Purchase Order #
Company/University:	Sample Label:
Address:	Expected Molecular Weight:
	Sample Quantity/ Concentration:
	Thermal stability:
	Possible contaminants:
Molecular Formula:	Suitable solvents water: THF (MALDI only): water/methanol: Other (please specify): methanol: methanol/chloroform: pH? low: neutral: high:
Structural Formula or Sample Composition:	Sample Storage: room temp. (20°C) refrigerate (0-8°C) freeze (-20°C)
	Toxicity: Y / N — Radioactivity: Y / N
	Reactivity: air sensitive? moisture sensitive?

GC Conditions:

Special Sample Considerations:

Analysis Requested	EI	CI	FAB	MALDI	ESI
Low Res					
High Res					
+Ve					
-Ve					
GC/MS					

Please acknowledge the Center in your publications which include mass spectral data in the following manner: "Mass spectral data were obtained at the University of Massachusetts Mass Spectrometry Facility which is supported, in part, by the National Science Foundation."

Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE. MS LAB USE ONLY.

Instrument Used		Conditions	Comments
JEOL MStation		Source Temp:	
Esquire-LC		Acc. Voltage:	
Reflex III		Resolution:	
HP 5980		Scan Range:	

Sample Log #:	Analyst:	Analysis Date:	Analyses Run:	Total Cost: