Mass spectrometry facility-Sample Submission Form (Use separate form for each sample)

450 Chevron Science center, Department of Chemistry, University of Pittsburgh, Pittsburgh, PA 15260

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File Number (1	for facility use)				SAMPLE LOCATION
Name		Advisor			1
Email		<u> </u>	<u>l</u>		1
Sample ID					1
Account No:					
Room Number			Date S	Submitted	
Phone No.		/		/2015	
Analysis Need O Nominal Mass O Fragmentation O HRMS/Accurat	led /LRMS spectrum (Popattern or MS/MS se mass for elementa	of the sample is sufficient op ½ of the area to make eaks in integer value) pectrum (For structural elu composition determination Da for JOC, 5PPM for OL);	the sample v cidation), pr n (Error in M	ovide the mass ass (mDa)/PPM	1).
O Dissertatio O Other	n	154 161 366, 611 111 161 62),	Journal Hair	io/i oquii orriorit	·
O Electron Ioniza O Electrospray Io O APCI/ASAP: Fo O MALDI: For hig O LCMS O GCM Solubility (Mus O CH ₂ Cl ₂ Sample State: Special Handli	onization: For polar, or non-polar and low gh M.Wt compounds of MS St Provide for any O MeOH O W O Solid O Liquid ng: O Air Sensitive of Solid O NMR O	w molecular weight componon-volatile high m.w commolecular weight compounding Peptides, Proteins, Pomalysis) // ater O ACN O Other	pounds nds ymers etc. er nsitive		opic Nominal Mass:
		Below For Facility	Use Only		
File Name					
Date					
Analyzed by					
Representative Masses					
Comments					