**MASS SPECTROMETRY**

**ANALYSIS REQUEST FORM**

**Date:**

|  |  |
| --- | --- |
| **Applicant Details** | |
| **NAME :**  **SURNAME :** | |
| **INSTITUTION :** | **Phone.** |
| **Research Supervisor :** | **Fax.** |
| **Address :** | **e-mail:** |

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| **Requested Analysis** | | | |
| **Ionization Method** | **ESI ⁭**  **Positive Ions ⁭ Negative Ions ⁭** | | **APCI ⁭**  **Positive Ions ⁭ Negative Ions ⁭** |
| **Information Requested:** | **Exact Mass ⁭** | **Nominal Mass ⁭** | **Fragmentation ⁭** |

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| **Sample Information** | |
| **Sample ID** |  |
| **Compound Type** |  |
| **Storage Condition** |  |
| **Safety Information** |  |
| **Sample Conditions** | **Solid⁭ Amount … mg**  **Soluble in** |
| **In solution ⁭Concentration … mg/ml**  **Solvent** |
| **Molecular Formula** |  |
| **Molecular Mass** |  |
| **Molecular Structure** |  |
| **Vaporizes at** |  |
| **More Information :** | |

Approval for Request

(Research Supervisor’s Signature)

*Laboratory of Molecular Analysis.*

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|  | [**Institute of Organic and Pharmaceutical Chemistry (IOPC)**](http://www.eie.gr/nhrf/institutes/iopc/index-en.html) |

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