

MASS SPECTROMETRY ANALYSIS REQUEST FORM

Date:

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

Requested Analysis			
Ionization Method	ESI ☐ Positive Ions ☐ Negative Ions ☐	APCI ☐ Positive Ions ☐ Negative Ions ☐	
Information Requested:	Exact Mass ☐	Nominal Mass ☐	Fragmentation ☐

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.

▣ **Institute of Organic and Pharmaceutical Chemistry (IOPC)**
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