



Mass Spectrometry

UCD School of Chemistry & Chemical Biology
Centre for Synthesis & Chemical Biology



Sample Submission Form	Name*			
	Supervisor*			
	Institution			
	Tel./Fax No.			
	E-mail*			
	Order/Acct. #			
	Date			
Sample Details				
Sample ID*				
Low Res. MS result (if you have them)*				
	ES+	Na+	ES-	
Proposed Structure*				
Molecular Formula*				
Exact Mass to 4 decimal points*				
Solvent/soluble in*				
	[] H ₂ O, [] CH ₃ CN, [] CH ₃ OH, [] Other:			
Storage requirements				
Tick if appropriate [] Hazardous, [] Air/Light Sensitive, [] Volatile				
Experiment requested*				
[] Exact mass (HR), [] Nominal mass (LR)				
[] MS/MS				

* must be completed



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[] Other

Comments:

* must be completed