

# U of M

University of Minnesota Department of Chemistry  
Mass Spectrometry Service Laboratory  
email: mslab@chem.umn.edu

Submit Sample To: Mass Spectrometry Facility  
207 Pleasant St. SE  
Minneapolis, MN 55455  
Phone: (612)-625-8099  
FAX : (612)-626-7541

Name:	Phone:				
Email: <small>Send Results? Y / N</small>	FAX: <small>FAX Results? Y / N</small>				
P.I./Advisor:	U of M Budget #				
Company/University:	P.O.# (For non-U of M Clients)				
Shipping Address:	Billing Address:				
Sample Label:	Molecular Weight:				
Structural Formula or Sample Composition:	Molecular Formula:				
	Melting/Boiling Point:				
	Solubility:				
	Thermal Stability:				
	Toxicity:				
Reactivity:					
<b>GC Conditions:</b>	<b>Analysis Requested</b>				
		EI	CI	MALDI	ESI
	Low Resolution Nominal Mass				
	High Resolution Accurate Mass				
<b>Special Sample Considerations:</b>	+Ve				
	-Ve				
	GCMS				
	LCMS				
<b>Instrument Used</b>	<b>Conditions Used</b>		<b>Operator Comments</b>		
VG 70SE	Source Temp:				
Finnigan MAT 95	Acc. Voltage:				
Extrel FTMS 2001	Resolution:				
Bruker Reflex III	Scan Range:				
Bruker BioTOF II	Gas Used:				
Log #:	Analyst:	Analysis Date:	Analyses Run:	Total Cost:	