

Application for Mass Spectrometric Analysis

Nebraska Center for Mass Spectrometry
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Department of Chemistry
University of Nebraska-Lincoln
Lincoln, NE 68588-0304

Please supply all relevant information

Submitter: _____ Bill To Address: _____
Advisor: _____
Address: _____

Phone: _____ - _____ - _____ Purchase Order Number: _____
Fax: _____ - _____ - _____
E-Mail: _____

Type of Analysis: HR-EI CI LR-FAB only LR/HR-FAB
ESI MS/MS MALDI Other

Sample ID: _____
Sample Formula: _____
Nominal Mol. Wt.: _____
m.p. or b.p.: _____
Purity (%): _____
Wt. Sample submitted (mg): _____
Soluble in: _____
Is sample stable in solution (Y/N)?: _____

Proposed Structure

Sensitivities: (check all that apply)

Heat: Light: Air: Moisture:

Instructions: (check all that apply)

Refrigerate: Return sample:

Comments, precautions, additional information. (Include hazards, handling, any data that might be helpful.)

Contact Info:

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