## Small Molecule MASS SPECTROMETRY SAMPLE SUBMISSION FORM §

Facility Location, Mailing

Medicinal Chemistry Mass Spectrometry Center

and Shipping Address: Box 357610

I•093 Health Sciences Building University of Washington Seattle, WA 98195-7610

(206) 543-6439 (office), 543-7794 (laboratory)

Web Site: <a href="http://depts.washington.edu/medchem/msc/index.html">http://depts.washington.edu/medchem/msc/index.html</a>

Web Cite:	<u>пцр://dcpts:</u>	waariirigtori	.ouc	////Cdoncin/mod	o/ in GOA.HUIII		
<b>Customer Identification</b>							
Submission Date	Budget or P.O #			P.I.			
Submitted by				Phone			
Billing Address / Dept.	FAX						
				Email			
		T		_			
Sample Identification	Sample's Return Requested? *						
Sample Label (as appears on	vial):						
Sample format (please select	Molecular Weight (M <sub>r</sub> ):						
Solvent and/or Solubility: Acetonitrile : MeOH : Other:		Empirical Formula:					
Quantity / Concentration:		Sensitivities:					
Origin: Synthetic □; Biological □ Purity:		Storage Requirements:					
Analysis Instructions		;	Stru	uctures & Co	omments:		
Ionization Mode:	Electron	(EI) 🗌					
Positive	Chemical (CI)						
Negative   Electrospray (							
Atmospheric Pressure chemi	cal (Apcl)						
Matrix Assisted LASER Deso	rption (MALDI)						
Mass Range Desired:							
Mass Measurement: N	ominal (LR) ☐; Accura	ate (HR)					
GC and/or LC/MS Analysis	(Contact Staff)						
S 0 W 10' "0 11							
§ See Web Site, "Sample I	•						
<ul> <li>Samples shipped as retune Local samples, if unclain</li> </ul>		_			returned.		
Internal Use Only - Data Files:	Instrum	ent	Γ				
	Analysis	s: Type/Tir	ne 🗀				
	Rate Co	ode					