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## MASS SPEC. SUBMISSION FORM

Name and Address
Order No.
Invoice Address (if different)

Tel No. \_\_\_\_\_

Fax No. \_\_\_\_\_

Email \_\_\_\_\_

Date \_\_\_\_\_ Urgency \_\_\_\_\_

Tel / Fax / Email / Post results (please indicate)

Sample Identification
Molecular Formula
Structure
Solvent in which it dissolves
Melting Point °C
Hazards (if any)

### Services required:

Low resolution EI / CI MS

High resolution MS

Low resolution fast atom bombardment

Accurate Mass (peak match) on (pseudo) molecular ion

Comments
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**For Office Use**

Date Received \_\_\_\_\_

Date Reported \_\_\_\_\_


Sample retained

Sample returned

Sample used, vial disposed of