

Request for Mass Spectrometry Analysis



Shared Instrument Facility
Department of Chemistry
French Family Science Center
124 Science Drive, Room 2323
Durham, NC 27708
Phone 919-660-1532

<https://chem.duke.edu/about/instrument-facilities>

RESEARCHER INFORMATION

Submitter Name: _____ Submitter Email: _____

Fund Code: _____ School/Department: _____

Lab/PI Name: _____ Date of Submission: _____

SAMPLE INFORMATION (Attach information for multiple samples to this form)

Sample Identifier: _____ Storage (Circle): Ambient / Refrigerated / Frozen

Molecular Formula: _____ Light Sensitive (Circle): Yes / No

Molecular Weight: _____ Solubility: _____

Special Handling: _____

Proposed Structure/Sequence:

ANALYSIS INFORMATION (Consult with lab staff as needed)

Requested Analysis: HRMS (ESI-TOF) LCMS GCMS (EI) MALDI Other (Specify Below)

Additional Details: _____
