



Mass Spectrometry Facility

Advanced Analysis Centre
Science Complex Rm. 1205
Tel. 519-824-4120 ext. 58649
dbrewer@uoguelph.ca

Request for High Res LC Mass Spectrometry Analysis

Date Submitted:				E-mail:			
Submitted By:				Phone Number:			
Post-doc	PhD	MSc	UnderG	Tech	Faculty	Other	
Supervisor:				Department:			

Please indicate if you want the rest of your sample returned

Sample Code: Please use separate sheet or reverse if space is not enough	Number of Samples:
Molecular Weight Range to Acquire:	
Molecular Formula:	
Approximate Concentration:	
Ionization Polarity: Pos Neg	
LC-column: Poroshell C18 BioMap peptide	Other:

For price information please visit <https://www.uoguelph.ca/aac/facility/mass-spectrometry>

I approve payment for this work within a 10% variance of estimated amount quoted at <https://www.uoguelph.ca/aac/facility/mass-spectrometry> and I authorize the Mass Spectrometry Facility and CBS Clerical Unit Staff to charge my

Trust Fund# _____ - _____ - _____ - _____ - 64251

Please provide full coding

Signature: _____