



Mass Spectrometry Facility

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

Request for Proteomic Quantitation Mass Spectrometry Analysis

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

Please check if you want the rest of your sample returned

Sample Code: Please use separate sheet if space is not enough

Number of Samples:

Protein Concentration:

As determined by BCA or equivalent assay

Buffer/Solvent:

Biological Source (species, organism):

Protein Source (cell, organ, tissue, subcellular etc):

Labelled **Yes** **No**

If labelled what kind?

Gradient Length:

FAIMS

I approve payment for this work within a 10% variance of estimated amount quoted in
www.uoguelph.ca/aac/msf and I authorize the Mass Spectrometry Facility to charge my

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

Please provide full coding

Signature: _____