**John L. Holmes Mass Spectrometry Facility**

**Mass spectrometry sample submission form**

 **User Information**

**User Name (Last, First): Address:**

**PI Name (Last, First): Email:**

**PI’s code: Submission Date:**

 **Description of Samples**

**Sample origin:**

**Total number of samples submitted:**

**Sample name:**

**Expected concentration range (g/l, nM, M, mM):**

**Total volume per sample (l):**

**Buffer or solvent composition:**

**Estimated purity (%):**

**Contaminants in the sample (salts, organic solvents etc.):**

**Molecular formula:**

**Masses/Mass range of interest (Da or m/z):**

**Ionization polarity: A) Positive B) Negative**

**Injection type: Direct infusion, MS, MS/MS or LC-MS, LC/MS/MS**

**Service requested\* (Describe briefly what you expect from us):**

**DATE:**

**Supervisor’s signature:**

**Please send a filled and signed copy of this form to zminic@uottawa.ca**