

Request form of mass measurement

Registration No. _____

Date of submission			
Advisor's name	⑧		
Contact information	E-mail address		@jaist.ac.jp
	Extension phone No.		
Name of sample			
Care instruction	NA • store in refrigerator • store in freezer • light interception		
Molecular weight			
Soluble solvent	water • methanol • acetonitrile • THF • other ()		
Sample condition	pure compound or mixture	Solid • liquid • solution (sol.)	
Sample properties (chemical structure、,molecular formulae、 Functional group)	(Please confirm molecular formula of your compound.)		
	Is the sample : <input type="checkbox"/> Toxic <input type="checkbox"/> Radioactive <input type="checkbox"/> Carcinogenic <input type="checkbox"/> Explosive <input type="checkbox"/> Unknown		
Mass resolving power and Ionization	Unit resolution	EI • ESI () ※ • MALDI () ※	
	High resolution	EI • ESI () ※	
Polarity	positive • negative		
Method of measurement	MS • MS/MS (m/z=) ※※		
Mass rage of spectrum	800 < m/z <2000		
recital			
Measurement date		Data file name	

※Please fill out a matrix for MADI and a solvent for ESI.

※※Please fill out m/z of precursor ion.

< Notice > Before you fill out above submission form, you should read <guideline for sample submission>.