

UNIVERSITY OF FLORIDA- MASS SPECTROMETRY RESEARCH AND EDUCATION CENTER

ON-CAMPUS SERVICE REQUEST FORM

Bring Sample(s) and Service Request Form to 101 CLB

Please TYPE all information on Form and have Form SIGNED prior to submission.

CONTACT INFORMATION: Date Submitted: Name: Email: Phone: Advisor Name: Email: Phone: Dept: *Dept ID *Project *(REQUIRED) Authorized Signature Title:

PLEASE NOTE: THE MS FACILITY CANNOT ACCEPT RADIOACTIVE or HAZARDOUS MATERIALS

Small Molecule Sample Information

Sample Name: Sample Quantity: mg Concentration: Soluble In (Check One): Methanol Acetonitrile Water THF Chloroform Other Formula: MW:

Additional Sample Comments:

For accurate mass analysis, insert or attach a structure.

Protein/Peptide Sample Information

Sample Name: Sample Type (gel, solution what buffers) Species: Additional Comments/Brief Description of Desired Analysis:

Desired Analysis

Molecular Weight/Molecular Formula Determination

- Ultra-High Resolution Accurate Mass/Formula Determination
Accurate Mass (molecular formula matching less than 1000 amu)

Proteomics

- SDS-PAGE
Albumin Removal/Phosphopeptide Enrichment
Cell Lysis/protein extraction
Protein Precipitation
Protein Quantitation (Qubit Assay)
Protein ID 1 Hr Gradient
Protein ID 4 hour Gradient
PTM or Quantitation
Multiple Enzyme Digestion

Metabolomics/Small Molecule

- GC or LC-MS Method Development
GC-MS
Low-resolution LC-MS
Ultra-high Resolution LC-MS
Training
Metabolite Extraction

University of Florida, Department of Chemistry - Mass Spectrometry Services
Department of Chemistry 126 Sisler Hall, Gainesville, FL 32611
Phone: 352-392-0566
SAMPLE ID #: (Office Use Only)