



Name of Researcher –

E-mail –

Supervisor –

Lab Book Code Number –

COSHH Assessment Code Number –

Possible Structural Formula –

Probable Molecular Formula –

Nominal Mass –

Melting Point in °C\* –

\* required for EI samples

**Ionisation Method Requested –**

Electron Impact –

☐

Chemical Ionisation –

☐

GCMS –

☐

Electrospray –

☐

sample soluble in

**Resolution Requested –**

Low Resolution –

☐

High Resolution –

☐

on *m/z*

**Additional Requirements / Information** (continue on reverse of form if necessary) –

Signature of Researcher –

Authorised by –

Date Submitted –

Grant Code to Charge –

For service use only –

Date low res run –

Service Code No –

Date high res run –