

MALDI TOF Mass Spectrometry Request Form

Updated 09/11/2009

Please complete all fields and return with sample to Biopolymers Group Lab

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|--------------------|--|
| NAME: | ACCOUNT #: _____ (7 digit) |
| EMAIL ADDRESS: | PRINCIPAL INVESTIGATOR: |
| MIT PHONE: | MIT DEPARTMENT: |
| MIT BLDG-ROOM NO.: | <input type="checkbox"/> KOCH INSTITUTE AFFILIATED OR <input type="checkbox"/> NCI-FUNDED PROJECT |
| TODAY'S DATE: | |

detailed info @ <http://web.mit.edu/ki/facilities/biopolymers/index.html>

Please indicate: Peptide () Protein () other () e.g conjugate, polymer, small molecule

| Sample name | Est. Mol. Wgt. | Conc. | Solvents, detergents, salts | Notes |
|-------------|----------------|-------|-----------------------------|-------|
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Additional notes:

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| <i>Biopolymers Division Use Only</i> | | | |
| DATE RECEIVED: | | DATE COMPLETED: | |
| LAB COMMENTS | | | |
| ACCOUNT CONFIRMED: <input type="checkbox"/> PI <input type="checkbox"/> EXPIRATION DATE <input type="checkbox"/> FACILITY SPONSOR | | | |
| COMMENTS: | | | |
| LAB ID V _____ | CHARGEBACK | SURCHARGE | TOTAL CHARGEBACK |