

## SAMPLE SUBMISSION FORM

<b>Name:</b>		<b>Date:</b>	
<b>Phone:</b>		<b>Company:</b>	
<b>FAX:</b>		<b>Company Address:</b>	
<b>E-mail:</b>			
<b>Charge/PO#</b>			
<b>Proposed Structure (if available):</b>			
<b>Molecular Formula:</b>		<b>Exact Mass:</b>	
<b>Describe sample:</b> (e.g. reaction product, biological sample, solvents used in final step; avoid nonvolatile buffers, detergents, TFA)			
<b>Toxicity</b>	<b>Sample Storage</b>	<b>Sample Amount</b>	<b>Suitable Solvents:</b>
<input type="checkbox"/> Extremely toxic	<input type="checkbox"/> Refrigerate (4 °C)	<input type="checkbox"/> Solids (mg)	<input type="checkbox"/> Methanol (MeOH)
<input type="checkbox"/> Toxic	<input type="checkbox"/> Freeze (-20 °C)	<input type="checkbox"/> In Solution	<input type="checkbox"/> Acetonitrile (ACN)
<input type="checkbox"/> Safe	<input type="checkbox"/> Light Sensitive	mg/mL:	<input type="checkbox"/> Acetone
	<input type="checkbox"/> Air/moisture Sensitive	Volume:	<input type="checkbox"/> MeOH/Water (1:1)
	<input type="checkbox"/> Acid Sensitive	Solvent:	<input type="checkbox"/> ACN/Water (1:1)
			<input type="checkbox"/> Other (specify)
<b>Analysis:</b>			
<b>Ionization</b>	<b>Type</b>	<b>Standard LC Method</b>	
		<i>May vary according to sample properties. Please indicate any changes on this submission sheet</i>	
<input type="checkbox"/> Positive	<input type="checkbox"/> FIA	UV Wavelength: 216, 230, 280, 254, 325 nm	Solvent A: 0.1% formic acid in water
<input type="checkbox"/> Negative	<input type="checkbox"/> LC-MS	Column: Xterra MS, C18	Solvent B: 0.1% formic acid in AcN
		Id x length: 50 x 2.1mm, 3.5 micron	Gradient: 5-100% B in 15min
		Flow Rate: 0.3 mL/min	