



**SAMPLE SUBMISSION FORM**  
**for HPLC / HPAEC / IC / MS**

User Name:	
Department:	Phone:
Address:	Email:

Number of Samples:
Sample Names: (please add an extra sheet, if necessary)

Brief project description:
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<b>Targeted Analysis</b>	<b>Untargeted Analysis</b>
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<b>FOR TARGETED ANALYSIS:</b>					
Amount of Sample ( $\mu\text{g}$ ; $\mu\text{l}$ ; number of cells): (please add an extra sheet, if necessary)					
Metabolites of Interest:					
Amino Acids	Sugars	Anions	Organic Acids	Thiols	Adenosines
Others (upon prior consultation with MCTP):					

<b>FOR UNTARGETED ANALYSIS (MS):</b>		
Amount of Sample ( $\mu\text{g}$ ; $\mu\text{l}$ ; number of cells): (please add an extra sheet, if necessary)		
Metabolites of primary Interest:	Polar Metabolites	Apolar Metabolites

Source (human, plant species, etc.) and Type (serum, tissue, cells, etc.) of Samples:
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Samples possess a biological safety risk:	No	Yes
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Billing Contact:		
Billing Address:		
Cooperation Service	..... Date	..... Signature