Spectroscopy Service Request Form

Submitter Information

Name:
Organization:
Address:

Phone: Fax:
Email:

Purchase Order # Date:

NMR ---- Sample Identification #_____

Check service requested:
^{1}H □ ^{19}F □

^{13}C □ ^{31}P □

2D analysis □ Spectra interpretation □ (Please contact us and discuss this beforehand)

Comments_____

Mass Spectrometry (MS) ----Sample Identification #_____

Check service requested:
ESI-MS □

APCI-MS □

LC/MS, LC/MS/MS and GC/MS □ (Please contact us and discuss this beforehand)

Comments_____

FT-IR ---- Sample Identification#_____

FT-IR □

Comments_____

Please print form, fill in appropriate information and mail to Ryss with sample to be analyzed