

Request Form

UEM REF:

Done:

Sent:

Linx:

IR Spectroscopy

Date Submitted:

User information

Name:

Research group/Company:

Email:

Signature:

Phone:

Number of samples:

Samples to be returned? YES / NO

Sample 1:

Sample Code:

Structure:

Remarks:

Sample 2:

Sample Code:

Structure:

Remarks:

Sample 3:

Sample Code:

Structure:

Remarks:

Sample 4:

Sample Code:

Structure:

Remarks:

Sample 5:

Sample Code:

Structure:

Remarks:

Sample 6:

Sample Code:

Structure:

Remarks:

Sample 7:

Sample Code:

Structure:

Remarks:

Samples