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UNIVERSITY OF MYSORE
CENTRAL INSTRUMENTATION AND RESEARCH FACILITY
INSTITUTION OF EXCELLENCE

Vijnana Bhavan, Hunsur Road, Manasagangotri, Mysore-570 006

Requisition for LCMS Analysis

Sample Submitted by		Details of the Guide	
Name :	Ravi B.N	Name :	Prof. J. Keshavayya
Department :	Chemistry	Department :	Chemistry
Contact No. :	9964040228	Contact No. :	
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Category : University of Mysore Other University/Institution Industry

Sample Information

Submitted Date :		Structure/Molecular formula/Molecular weight
Sample Name :	—	
Sample ID :	A, B and C	
Solubility :	—	
No. of samples :	Three Samples	

Type of Analysis

LCMS MADLI APGC Other: _____

Declaration:

I agree that all the information provided above is true. In any publication to be published using the results, LCMS Facility, IOE, University of Mysore, Manasagangotri, Mysore 570 006, India will be acknowledged and a copy of the same will be sent to the IOE Office, University of Mysore, Manasagangotri, Mysore 570 006, India.

Ravi B.N
Signature of the Student


 Signature of the Guide (With seal)
Prof. J. Keshavayya, Ph.D.,

Department of Chemistry

Kuvempu University, Manasahyadri

Signature of the Instrument in-charge

Mysore-577 451, Shimoga, Karnataka