



CENTRAL INSTRUMENTATION AND RESEARCH FACILITY

INSTITUTION OF EXCELLENCE

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

Requisition for LCMS Analysis**Sample Submitted by**

Name : Dr. Southea
 Department : Houd V
 Contact No. : 9606176818
 Email ID : SUnitua.JN@houd.com

Details of the Guide

Name : H & V. Mysuru.
 Department :
 Contact No. : do
 Email ID :

Category : University of Mysore Other University/Institution Industry

Sample Information

Submitted Date : 10-07-2020
 Sample Name :
 Sample ID :
 Solubility :
 No. of samples : 10

Structure/Molecular formula/Molecular weight

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.

Signature of the Student

Signature of the Guide (With seal)

Signature of the Instrument in-charge