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|  | | | | | | | | | | | | | | | **FOR LAB USE ONLY** | | | | | | | | | | | | | | |
|  | | | |  | | | | Quote No. | |  | | | | |
| Confirmation of receipt sent? | | | | 🞎 Yes 🞎 No 🞎 N/A | | | | COC No. | |  | | | | |
| Temp. Storage: | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |  | |  | | | |  |
|  | | | |  | | | | QA No. | |  | | | | |
| Client/ Company |  | | | Telephone | | | | | |  | | |  | | State: | | | | 🞎 Liquid 🞎 Solid | | | |  | |  | | | |  |
|  | | | |  | | | | | |  | | | | |  | | | |  | | | | COA No. | |  | | | | |
| Email |  | | | | Bill to / Purchase Order No. | | | | | | | |  | | Instrument ID: | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |  | |  | | | |  |
|  | | | |  | | | | | |  | | | | |  | | | |  | | | | TR No. | |  | | | | |
| Address |  | | |  | | | | | |  | | |  | |  | | | |  | | | |  | |  | | | |  |
|  | | | | | | | | | | | | | | | File ID: | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | ALL No: | |  | | | |  |
| Contact name |  | | |  | | | | | |  | | |  | |  | | | |  | | | | GRP No: | |  | | | |  |
|  |  | | | | | | | | | | | | | | Photos taken? | | | | 🞎 Yes 🞎 No | | | |  | | | **FOR LAB USE ONLY** | | | |
|  | | |  | | |  | | | |  | | | | |  | | Required test | | | | | | | | | SAMPLE LAB ID | | | |
| Sample name | | | | | | | | CAS No. | | | Sample amount | MW (g/mol) | | MSDS | Solvent | | % Purity | Identification | | | Structure Elucidation | | | Return sample (YES: surcharge for postage) | |  | | | |
| NOTEBOOK ID and PAGE | | | |
|  | | | | | | | |  | | |  |  | | 🞎 Y 🞎 N |  | | 🞎 | 🞎 | | | 🞎 | | | 🞎 Y 🞎 N | |  | | | |
| Sample structure (if known or expected) | | | | | | | | | | | | | | | | | | | | | Known instabilities/hazards | | | | | | | | |
| Disposal 🞎 Y 🞎 N  Instructions | | | | | | | | |
| Turnaround Request | | Reporting Requirements | | | | | | | |  | | Comments | | | |  | | |  | | |  | | |  | | |  | |
| 🞎 Standard | | 🞎 Standard COA (Purity in %) | | | | | | | | | |  | | | |  | | |  | | |  | | |  | | |  | |
| 🞎 Priority (Surcharge) | | 🞎 Test Report | | | | | | | | | |  | | | | | | |  | | |  | | |  | | |  | |
|  | |  | | | | | | | | | |  | | | | | | |  | | |  | | |  | | |  | |
| Submitted by: | | | | | | | Date: | | | | | Time: | | | **FOR LAB USE ONLY** | | | | | | | | Date: | | | | Time: | | |
|  | | | | | | |  | | | | |  | | | Received by: | | | | | | | |  | | | |  | | |
| NMR-FORM-017 Chain of Custody Form | | | | | | | | |  | | | | | | | | | | | V 4.0 | | | | | | | | | |