

Order form (NMR spectra)

Number of order: _____				Operator		Date of measurement		Time			
NMR Service Group, IChO PAS 44/52 Kasprzaka Street 01-224 Warsaw, Poland Phone: +48 22 343 20 14											
Customer/Client											
Name & surname				Institution/Group number/Payment (number of grant)							
Bruker 500 MHz		Varian 500 MHz		Varian 600 MHz		Phone		Date of order		Signature of the authorized person	
Sample data											
Symbol / name		General formula		Molecular mass		Solvent		Temperature of measurement		Amount of compound:	
										Return of sample: YES or NO	
Supposed/Predicted structure of compound											
Type of measurements											
<i>Spectra with detection in the ¹H channel</i>											
1D ¹ H	1D sel-NOESY	2D COSY	2D NOESY	2D ROESY	HSQC { ¹ H, ¹³ C}	HSQC { ¹ H, ¹⁵ N}	HMBC { ¹ H, ¹³ C}	HMBC { ¹ H, ¹⁵ N}			
<i>Spectra with detection in the ¹³C channel</i>				<i>Spectra with detection in the X channel</i>							
1D ¹³ C decoupled	1D ¹³ C coupled	DEPT		1D ¹⁴ N	1D ¹⁹ F	1D ³¹ P	1D X = Sn, Si, Se				
Comments:											
Spectra in an electronic form (FID via server or e-mail):				Confirmation/Acknowledgement receipt of spectra/sample:							
Spectra in a paper/printed form:				Date: _____ Signature: _____							

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<i>Spectra with detection in the ¹³C channel</i>				<i>Spectra with detection in the X channel</i>							
1D ¹³ C decoupled	1D ¹³ C coupled	DEPT		1D ¹⁴ N	1D ¹⁹ F	1D ³¹ P	1D X = Sn, Si, Se				
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