



University of California, Berkeley
College of Chemistry
X-ray Crystallography Facility
32 Lewis Hall
Berkeley, CA 94720-1460
Phone: (510) 642-8444 Fax: (510) 642-9295

Facility Use Only

Name: _____ E-mail: _____

Phone: _____ Lab Location: _____

Group/PI/Company: _____ Account or P.O. #: _____

Sample/Notebook ID: _____ X-ray ID: _____

Reaction (include all solvents and reagents used):

Proposed Structure (numbering scheme optional):

Note: draw out and define all non-standard ligands

Recrystallization solvents used or known solubility:

Sample Information:

Molecular Formula (no abbreviations):

Sample Stability (check all that apply):

- air sensitive hygroscopic
 pyrophoric use glove box only
 light sensitive temp. sensitive
 explosive radioactive

Special instructions/warnings:

Sample Characterized by:

- NMR EPR IR UV/Vis
 EA MS X-ray: _____

Sample Disposition:

- Save & Return Diffracted Crystal
 Save & Return Unused Sample
 Dispose

Services Requested/Performed:

R / P

Instrument Time (I will collect, solve, and refine my own data) Time Used (hh:mm): _____

Exam/Unit Cell: a : _____ b : _____ c : _____ α : _____ β : _____ γ : _____ V : _____

Complete X-ray Data Collection, Analysis, and Report