

MANCHESTER
1824

The University of Manchester

RDPm82

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11 1711

12 1832

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Email: chem-microlab@manchester.ac.uk

APPLICANTS NAME CONRAD TEL No _____

SAMPLE REF No _____

ROOM No _____ SECTION _____

MPt/BPt _____ SOLVENT _____

ELEMENTS PRESENT _____

ANALYSE FOR _____

TYPE OF COMPOUND OR STRUCTURE (if possible) _____

STATE COSHH HAZARD LEVEL (V H M or L) AND LIST KNOWN OR SUSPECTED HAZARDS TO HEALTH AND SAFETY AND GIVE PRECAUTIONS

SENSITIVE TO:- AIR ☐ OXYGEN ☐ LIGHT ☐ MOISTURE ☐

OTHER COMMENTS _____

SUPERVISORS SIGNATURE _____

**Mr M JENNINGS
MICRO ANALYTICAL LABORATORY
SCHOOL OF CHEMISTRY
THE UNIVERSITY OF MANCHESTER
MANCHESTER M13 9PL**

PLEASE GIVE APPROX. PERCENTAGES OF ELEMENTS PRESENT IN THE EXPECTED COLUMN.

	EXPECTED	FOUND
C	63.75	64.22
H (11)	9.76	9.98
N		
Cl		
Br	(12) C	64.71
I	H	10.10
F		
S		
P		
Mol.Wt.	640.59	

COMMENTS

0.25 ml per ml.

C 64.7

H 9.72

DATE RECEIVED 30.11.17

DATE REPORTED 01.12.17

FORM TO BE FORWARDED COMPLETE (i.e. in Duplicate) TOGETHER WITH SAMPLE