

Manitoba Chemical Analysis Laboratory (MCAL)

Room 318, Dept. Chemistry
U of Manitoba, Wpg. R3T 2N2

Phone: 204-474-6561
E-mail: Emy.Komatsu@umanitoba.ca

Instrument Use / Analysis Request Form

Date: _____ Submitted: _____

Analysed: _____

Name: _____ Room / Phone _____ / _____

Address / Dept: _____ Grant / PO#: _____

Researcher: _____ FOAP# _____

Sample(s) ID: _____

Lab. Sample # (s): _____

Sample formula:	Structure:	Mol. Wt.	Conc:
-----------------	------------	----------	-------

Notes / special instructions / solvent / toxicity:

Instrument	Samples	Cost per sample	Hours	Cost. per hour	Total cost
GC					
MS (probe)					
GC-MS					
ICP-OES					
LC					
LC-MS					
MS-ESI					
Spec-UV-VIS					
Spec-Fluor					
Electrophoresis					
ESI					

Analyst: _____	PST:	_____
	GST	_____
	Total Cost:	_____

Comments: