Universidade do Minho

NMR request form

Sample

Reference number/Name of sample	
Origin of sample	

Contacts

Address:		
Telephone:		**Fax:**
Email:		**Other:**
Preferred mode of contact:		

Structure of the compound

Molecular weight:
Sample amount:

Solvent to be used in the experiments:

Type of experiments:

^{1}H Spectrum	COSY	NOESY	^{13}C Spectrum	DEPT θ 135 º	HSQC	HMBC

Observations and notes:……..

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