

Chemistry Glass Facility Request Form

Name of Requestor

Benjamin Revis

Today's Date

01/22/2015

Advisor/PI

Larsen

Department

Chemistry

Account Number (MFK)

1234-2345613491276-00000-00

E-mail

example@uiowa.edu

Phone #

Type of Service Requested

- Consultation
 Repair
 New Fabrication
 Repair & Fabrication

In the space below, or with an attached page, please provide a brief but detailed description or drawing of the work to be completed by the glassblower. **Please provide all pieces to be repaired in the cleanest form possible.**

What was the most recent content(s) used in the glassware? or Unknown.

Soap and water followed by Acetone rinse, with a final D.I. water rinse.
or
UNKNOWN

Description of work requested

Repair 2 Short-path condensers, 4 vacuum adapters, 1 column

Fabricate New Schlenk Manifold based on attached drawings.

Click [HERE](#) and attach this and all supporting files to the email address provided. Thank You.