# Application form for sample submission

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| **To** | | |
| In-charge, Mass spectrometry Unit | | |
| Sophisticated Analytical Instrument Facility& Research | | |
| CSIR-Central Drug Research Institute | | |
| Lucknow-226031 | | |
|  | | |
| **Reference :**Sample Analysis | | |
|  | | |
| Dear Sir, | | |
| Please accept the following sample for the analysis, the details are underneath | | |
|  | | |
|  | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **NEFT Details** | | | | | | **Ref. No** | **Bank** | **Branch** | **Date** | **Amount** | |  |  |  |  | /- | | **Total** | | | |  | | | |
|  | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **S#** | **Sample** | **Qty. in mg** | **Solubility** | **Analysis** | **Mass Range** | | 1 |  |  |  |  |  | | 2 |  |  |  |  |  | | 3 |  |  |  |  |  | | 4 |  |  |  |  |  | | 5 |  |  |  |  |  | | | |
| Note if any:  1. Separate samples should be sent for different analysis.  2. Samples and payment details should be sent preferably in the same cover. | | |
|  | | |
| **Signature** |  | |
|  | | |
| **Name of Facility User...............................................................**  **Email-ID: ...............................................................................**  **Tel/Mobile No........................................................................**  **GST No………………………....** |  |  |