X-ray Crystallographic Facility Sample Submission Form

X-ray Crystallographic Facility
Department of Chemistry, University of Rochester
B14 Hutchison Hall, 120 Trustee Road
Rochester, NY 14627
(585) 273-4715

Chemist's Information

Name: Phone:			
Email: Adviser:			
Billing Account Number:			
Billing Contact Address:			
Sample Information			
Sample Name: Formu			
Crystal Growth Temperature:°C Color:	Shape:		
All Solvents Used:			
Sensitivities: Oxygen Water Shock Temperature C (melts / decomposes)			
Special Handling:			
Proposed Structure (with labeled atoms if you have a preference):	Possible Impurities (starting materials, etc.):		
	Control in particles (camering in account, ever).		

Upon completion of the structural analysis, the submitter receives a CIF (crystallographic information file) for journal and database submission and a full report file with diagrams.

Samples will not be returned unless requested so at the time of submission.

Experimental Data [FOR INTERNAL USE ONLY]

Submission Information

XCF Code: Collected:	Completed:	Billed:	
Initial Data			
Color: Cell (Å, °): a:	α:	Volume (Å ³):	
Shape: <i>b</i> :	β:	Reflections:	
Size (mm): x x c:	γ:	Centering:	
Collection Parameters			
Detector Distance (cm):	Frame Time (s): Total 7	Гіте (hr):	
Temperature (°C):	Scan Scenario:		
Frame Width (°):			
Integration Resolution (Å):	Solution, Refinement, and Re		
Transmission Maximum:	Space Group: (Number:)	
Transmission Minimum:			
Final Cell (Å, °): a:	α : Volume (Å ³):		
<i>b</i> :	β : Reflections:		
c:	γ:		
Refinement Final Resolution (Å):	Bond Precision, C—C (Å):		
Reflections (Total): (Unique):		[Flack:]	
Parameters: Restraints:		[Friedel pairs:]	
R (internal): R1 (observed):			
GooF: wR2 (observed): wR2 (all data): [Twin Law: Twin Description:]			
[Reflections (Component 1):			
	(Component 2) (Both)	·	
[Twin Mass Ratio:]			