

To be completed by applicant:

Institute/Company:

Name:

Tel. Nr :

e-mail:

Date:

Sample name:

Empir. sum formula:

Mother liquor:

Struktur (optional):

Repeat measurement? Yes No

Yes? Filename:

Measurement at 295 K oder 150 K

Sensitive to air or moisture? Protective measures necessary? Please give details:

Should the remaining substance be returned to the user? Yes No

For orders outside the Ulm University: Signature of the head of institution

Measurement protocol (to be completed by the operator):

Filename: _____ Date: _____

radiation source: Mo Cu

lattice constants:

a: _____ b: _____ c: _____

α : _____ β : _____ γ : _____

Lattice _____ Space group _____ Cell volume _____

Crystall size: _____ SKT Crystal in Oil

Temperature: RT 150 K

Tube values: 50 kV / 0,8 mA Distance: 53 mm

Frames: _____ Time/picture: _____ Measurement time: _____

Giko-reflexes: _____ Compl.: _____

Comments: _____

Date/Signature of operator