

**University of Illinois**  
 at Urbana-Champaign  
**George L. Clark X-ray Laboratory**  
**Materials Chemistry Facility**

**School of Chemical Sciences**  
 505 South Mathews Ave  
 Urbana, IL 61801

College of Liberal Arts  
 and Sciences  
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 (217) 244-1708

Name \_\_\_\_\_ Advisor \_\_\_\_\_  
 E-mail \_\_\_\_\_ E-mail \_\_\_\_\_  
 Phone \_\_\_\_\_ Account \_\_\_\_\_  
 Sample ID \_\_\_\_\_ Formula \_\_\_\_\_  
 Solvent \_\_\_\_\_

**Precautions**

acidic  
 biological  
 carcinogenic  
 caustic  
 flammable  
 lachrymator  
 other \_\_\_\_\_

peroxide  
 pyrophoric  
 radioactive  
 shock sensitive  
 skin irritant  
 toxic

**Special Instructions**

call for sample  
 air sensitive  
 heat sensitive  
 light sensitive  
 loses solvent  
 remote inspection  
 other \_\_\_\_\_

protect skin  
 stench  
 store in freezer  
 sublimes  
 volatile solvent  
 Xray sensitive

(check all that apply)

Service	(\$10 / hour charged for standard hours listed below)	CCD	P4RA
<input type="checkbox"/> inspection	(select, mount, align, rotation photo)	2.5	2.5
<input type="checkbox"/> cell parameters	(preliminary frames, matrix)	2.5	2.5
<input type="checkbox"/> data	(hemisphere collection)	7.5	15.0
<input type="checkbox"/> low temperature	(liquid nitrogen)	2.5	2.5
<input type="checkbox"/> solution	(consulting fee charged if successful)	5.0	5.0
<input type="checkbox"/> powder	(mount, record, process image)	2.0	2.0
<input type="checkbox"/> GADDS	(staff experiment, instrument hours times 2)	_____	_____
<input type="checkbox"/> SAXS	(staff experiment, instrument hours times 2)	_____	_____
<input type="checkbox"/> consulting	(one time fee charged following first visit, open hours: 10:00-11:00am and 2:00-3:00pm, Mon to Fri or by appointment)	5.0	
<input type="checkbox"/> other	_____	_____	_____

Date In \_\_\_\_\_ Total Cost \_\_\_\_\_  
 Out \_\_\_\_\_ MCF Number \_\_\_\_\_