

## Mark Wainwright Analytical Centre X-Ray and Elemental Facility XRF Laboratory

## **Request for Oxygen Analysis**

Date	School / Department		nt		
Analysis requested by		Supervisor's Name	Supervisor's Name		
Contact Phone		Supervisor's Phone	Supervisor's Phone		
Contact Email		Supervisor's Email	Supervisor's Email		
<del>, , , , , , , , , , , , , , , , , , , </del>	search 🔲 UG	6 / Honours	Consulting	g 🗖 Other	
Account for Charges:  1. Project Code  Company is a n/Many					
2. Fund Code		Supervisor/Manager's			
3. Dept. ID		Signature	Signature		
Supervisor ORCHID					
Sample No. and Description: (	Please specify the samp	ole type: <i>e.g.,</i> plant, fertili	zer, synthe	etic organic, soil, oxide	e, alloy, etc.)
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2					
3					
4					
5					
(If you have more samples to I	ist, please use the next	page)			
Total Number of Analyses <b>(in</b>	cluding duplicates):				•••
Do you want the sample/s retu		o 🗆			
•					
Does your sample contain >1-	-2% of the following sub	stances?			
(1) Alkaline/alkaline earth substances ( <i>e.g.</i> , Li, Na, Ca, Mg, etc.): Yes □			] No □		
(2) Phosphate substances:			Yes □	] No □	
(3) Heavy volatile metal substances (e.g., Pb, Hg, As, etc.):			Yes 🗆	] No □	
Any hazard or safety concern (If yes, please specify and provide the SDS):			: Yes 🗆	] No □	
Have the samples been treated with acids?			Yes □	] No □	
(If yes, please wash with wa	ter and dry thoroughly be	efore sample submission	)		
Expected Concentration Rai	nges: (e.g. 10-20% O)				
Expected Concentration Nat	iges. (e.g., 10-20 % O).				•••••
<u>Notes</u>					
Recommended sample weigh staff.	at is 10 mg but may be	more or less depending	on sample	es. Please discuss wi	th XRF
Please submit a complete list	of sample numbers. Fo	r large batches, please r	number sar	mples consecutively.	
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PLEASE COLLECT SAMPLES	WITHIN 2 WEFKS OF AN	ALYSIS COMPLETION - S	SAMPLES V	VII I NOT BE KEPT	
CI COLLEGE OAMS ELO	The state of the s		220	<u></u> 32 NC/	
Office Use Only					
Det	Deta (1/01-	Total Newsbar of O	manalas:	Tatal Oaat	
Date:	Rate \$/Sample:	Total Number of Sa	mpies:	Total Cost:	

## **Additional Samples**

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