

OF MYSORE CENTRAL INSTRUMENTATION AND RESEARCH FACILITY INSTITUTION OF EXCELLENCE

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Requisition for NMR Analysis	
Sample Submitted by	Details of the Guide
Name : YASHASWINI.S Department : PHARMACOLOGY Contact No. : 9113592912 Email ID : yashaswiniyashika15@gmail.com	Name : DR PRASHANT TIWARI Department : PHARMACOLOGY Contact No. : +8 2886 5022 Email ID : dr prashartiwasi spsad so edus
Category : Researchers - Inst	titution of Excellence
Sample Information	
Submitted Date : $2 \circ (7/23)$ Sample Name : $12 - 3$ Sample ID : $12 - 3$ Solubility : $CDCl_3 \square DMSO, d^6 \square MeOH, d^4 \square Acetone, d^6 \square Others: ch/oreform No. of Samples : 3$	3) (1) -> 304. 30g/mol
Tests Re	equired
¹H NMR ☐ · dept ☐	2D others
Declaration: I agree that all the information provided above is true Facility, IOE, University of Mysore, Manasagangotri, Mysore 57 be sent to the IOE Office, University of Mysore, Manasagangotri, Signature of Student	

Signature of the Instrument in-charge

For Office Hee Only