

**Synthetic Organic Chemistry Core Laboratory
University of Texas Medical Branch
Service Request**

<i>SOCCL Use Only</i> P.I. ID-Project# _____ Date Received _____ Date Completed _____
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Requested By: _____

(Please Print Name)

FRS# / Grant#: _____

EDS Dept. Code / ISC#: _____

Department: _____

Building/Room/Campus Mail Route: _____

Phone/FAX/Email: _____

NIEHS Center member: YES _____ NO _____ If yes please state in 150 words or less how this use of the Synthetic Organic Chemistry Core benefits your research and advancement of environmental health science:

Type of Service:

(Describe work to be performed by SOCCL, including structures or sequences for synthesis, amounts needed, level of purification and product analyses desired, etc. Use back of this sheet or attach additional sheets with protocols and pertinent references as needed):

Note: In addition to regular service fees, PI agrees to supply or reimburse SOCCL for any special project materials or supplies necessary for the above work to be performed.

Service Authorized by: _____ **Date:** _____

(Signature of Principal Investigator or designated alternate)

Return to Richard P. Hodge, Ph.D., SOCCL, ext 76870, FAX 74753, BSB 2.205, Mail Rte 0638. Thank you!

Please Note

Since salaries are not included in cost assessments, services are in effect being supported by the University of Texas Medical Branch, the NIEHS Center Grant (ES 06676), the Sealy Center for Molecular Science, and the Sealy Center for Environmental Health and Medicine. Therefore, please acknowledge the Synthetic Organic Chemistry Core Laboratory and the NIEHS Center Grant in all publications utilizing these services. We would also greatly appreciate being informed of publications and grant proposals presenting results utilizing these services which allow

**us to justify continued institutional and Federal support. Your cooperation assures our future service to you.
Thank you!**