

## FTIR Facilities



**Advanced Materials Research Centre (AMRC), Kamand Campus  
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Name of the Indenter:

Date:

Email& Mobile No.:

### **Description of the sample:**

**Sample ID:**

**Composition :**

**Solvent used (if any) :**

- 1.
- 2.
- 3.
- 4.
- 5.

Any relevant information you may add:

Signature of the Indenter:

Signature of the Supervisor:

Name:

Name:

Date & official stamp

### **Address for Correspondence:**

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