

## Sample information sheet – Particle Size Submicron

CUSTOMER DATA	
Company:	
Contact person:	
Tel.:	
E-mail:	
Address:	

Sample description			
Material			
Absorption (opt.)			
Quantity [g, ml]			
Concentration (opt.)			
Safety data sheet	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Dispersing medium			
Refractive index (opt.)		Viscosity	
Expected mean diameter			
Desired completion date			
Presentation of results	Cumulative curve <input type="checkbox"/>		Frequency distribution <input type="checkbox"/>
Initial measurement	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Extra measurement	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

<p>Notes, requests and suggestions regarding the sample, sample dispersion, etc.</p>	
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