

Avanti Research Custom Synthesis Request Proposal Form

Custom Synthesis Request Form:

Please complete the form and return to Avanti.CustomSynthesis@avantiresearch.com

General Customer Information	:		
Request Date:			
Customer Name:			
Customer Email Address:			
Company Name:			
Ship To:	Bill To):	
Croda Representative(s):			
Custom Synthesis Deliverable	s Information:		
Product Name:			
Structure: (please paste the structure into the box below)			
*structure should be an exact representation of the requested product including salt form, any			
defined stereochemistry, polyme	r length, etc.		
Quantity:			
Packaging:			
Physical state:	☐ Neat Form ☐ Solution		
	If Solution, please indicat	te solvents:	
	If Other, please indicate:		
Requested purity:	Not specified		
Requested analytical tests:	☐ HNMR ☐ CNMR ☐	TLC □ HPLC □ MS □ Other (please	
	specify below)		
	If Other, please specify:		
Additional Deliverables (if applicable):			
Notes (if applicable):			



Custom Synthesis Proposal – AVANTI RESEARCH REPRESENTATIVE TO COMPLETE

Proposal Information:		
Avanti Quote Number:		
Lead Time (from date		
PO is received):		
Product Quantity:		
Product Physical State:	☐ Neat Form ☐ Solution ☐ Other	
	If Solution, please indicate solvents:	
	If Other, please indicate:	
Product Packaging:		
Price/unit (\$/mg):		
Total Price (\$):		
Purity and purity		
analysis method:		
Analytical tests to be	☐ HNMR (conforms to structure)	
included	☐ CNMR (conforms to structure)	
	☐ TLC	
	☐ HPLC (>97%)	
	☐ MS (conforms to structure)	
	☐ Other (please specify below)	
Notes (if applicable): COA will be delivered upon shipment of material		
Notes (ii applicable).	4 will be delivered upon simplificate of material	
Quote Expiry Date:		