**Internal analytical cost form (Chemistry lab)**

***Application part (****hand out to Dr. Donata Monien, without samples aren´t processed****):***

Name:Click here to enter text. Work group: Click here to enter text.

Project: Click here to enter text. Cost code: Click here to enter text.

Key words for data set (for recognition, needs to be also on sample lists): Click here to enter text.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| No. | Type of analysis: | Parameter | Method | No of sample  | Price/ measurement | Total price | Date (when samples are ready for measurements) |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |
| SUM |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Name and Signature of person responsible for cost code

***Note: Final cost could vary.***

Internal job number: Click here to enter text.

Accounted on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_