



**Center for Applied
Isotope Studies**
UNIVERSITY OF GEORGIA
Radiocarbon AMS Dating

CAIS USE ONLY

CAIS Invoice Number _____

Date Received _____

Date Analyzed _____

Please **COMPLETE**, **PRINT**, and **ENCLOSE** a copy of this form with your sample.

CAIS Radiocarbon Dating Laboratory
120 Riverbend Road Athens, GA 30602-4695

Phone: 706-542-1395
Fax: 706-542-6106
Email: cais@uga.edu

SUBMITTER INFORMATION

Submitter Mailing Address:

Name				
Organization				
Street Address				
City		State		Zip
Telephone		Fax		
Email				

Submitter Billing Address (if different from above):

Name				
Organization				
Street Address				
City		State		Zip

Account Information (if applicable)

PO #	
UGA Account #	
Account or Grant Name (if any):	

Discount (if applicable)

Discount Code:	
Name of Person & Price Quoted:	

ANALYSIS REQUESTED (Check all that apply)

<input type="checkbox"/>	AMS Dating	<input type="checkbox"/>	AMS, $\delta^{13}\text{C}$ and $\delta^{15}\text{N}$ on the same sample
<input type="checkbox"/>	Calibrating AMS dates (no charge)	<input type="checkbox"/>	XAD resin AMS
<input type="checkbox"/>	$\delta^{13}\text{C}$ and $\delta^{18}\text{O}$ on Bioapatite	<input type="checkbox"/>	Hydroxyproline AMS (contact first)
<input type="checkbox"/>	$\delta^{13}\text{C}$, $\delta^{15}\text{N}$ and C:N ratio on Collagen	<input type="checkbox"/>	$^{87}\text{Sr}/^{86}\text{Sr}$
<input type="checkbox"/>	$\delta^{13}\text{C}$ and $\delta^{18}\text{O}$ on DIC or Carbonates	<input type="checkbox"/>	Rush service (7 day)

SAMPLE INFORMATION

Date Submitted

Date Collected (month/year)

Sample Context

Site Name

Environment

Location

Longitude

Latitude

Comments:

UGAMS # CAIS use only	Sample ID	Material Type	Estimated Age	Potential Contaminants	Other Information

*Attach spreadsheet for additional samples if necessary
Please send spreadsheets for large submissions (e.g., >10) by email*