ElementConcordSampleSubmissionForm

QuoteReferenceNumber:(Required for testing)

PurchaseOrderNumber:(Required for testing)

CustomerContactInformation

CompanyName:

StreetAddress:

City/State:

ContactPerson: Email(s):

Phone/Ext.:

Turn Around Time Requested: Standard Rush (additional charges apply)

FCRSTERILITOINLY: N/A BatchSize: VolumePerCortainer:

Category Liquids Solid

Classification:

Non-injectable Prepd5w 9.96 0 0 9.96 281.8808 473.7 (b)

Room Temperature

Refrigerator (28°C)

Freezer (20±10°C) Ultracold (70±10°C)

Other:

Loginby/date

ReportNo. or Gient Protocol (**P**)

Location

SAMPLISTORAGREQUIREMENT/S

RoomTemp Refrigerator(2-8°C) Freezer(-20±10°C) Ultracold (-70±10°C)

SPECIALNSTRUCTIONS/COMMENTS: N/A Is this a commerciaproduct W z • E }

SamplePickUp N/A TransportCondition: RoomTemperature □ Cold ☐ Dry Ice SamplePickUp By/Date/Time: SampleArrival By/Date/Time: SampleIntegrity Uncompromised Compromised If CompromisedExplain: Sample Transport Temperatur€ N/A LogTaglD Within Range Out of Range, Explain No/Cal due LabReceivedBy/Date: Comments: □ N/A

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