

ElementConcordSampleSubmissionForm

QuoteReferenceNumber: (Required for testing)

PurchaseOrderNumber: (Required for testing)

CustomerContactInformation

CompanyName:

StreetAddress:

City/State:

ContactPerson:

Phone/Ext.:

TurnAroundTimeRequest: Standard [Rush](#) (additional charges apply)

SampleDescription: (i.e. purified water, WFI, product):

Is this a controlled substance? E } z • Schedule:

FOR STERILITY ONLY: N/A Batch Size: Volume Per Container:

Category Liquids Solid

Classification: Non-injectable Prepd 5w 9.96 0 0 9.96 281.8808 473.7 (b)

Other:

SAMPLE STORAGE REQUIREMENTS

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

SPECIAL INSTRUCTIONS/COMMENTS: N/A Is this a commercial product? E } z •

ElementConcordUseOnly

Transport Condition: Room Temperature Cold Dry Ice Sample Pick Up N/A

Sample Pick Up By Date/Time: Sample Arrival By Date/Time:

Sample Integrity Uncompromised Compromised If Compromised Explain:

Sample Transport Temperature N/A

Log Tag ID Within Range Out of Range, Explain

No./Cal due

Lab Received By/Date:

Comments:

N/A

(ElementUseOnly)	
Login by/date	
Location	Room Temperature Refrigerator (28°C) Freezer (-20±10°C) Ultracold (-70±10°C)

Report No. or
Client Protocol (E)
No.

Email(s):

ElementConcordSampleSubmissionForm

QuoteReferenceNumber:

