

 FL DOH Certification No.: E861096-01 US EPA Lab ID: FL01285	Title: Microbiology Testing - Raw Materials Sample Submission Form	CAPZER PHARMACEUTICALS 3677 23 rd Ave. South, Suite A108 Lake Worth, FL 33461 Phone: 561-493-4000; Fax: 888-421-4181 Website: http://www.capzerpharma.com/
	No.: R&D-81016.03	Version: 00

Send Results To: (check all that apply)
<input type="checkbox"/> Attn:
Client/Vendor:
Address:
(City, State, Zip):
Phone:
<input type="checkbox"/> Fax:
<input type="checkbox"/> E-mail:

Send Invoice To: (check all that apply)
<input type="checkbox"/> Attn:
Client/Vendor:
Address:
(City, State, Zip):
Phone:
<input type="checkbox"/> Fax:
<input type="checkbox"/> E-mail:

Sample #	Sample Description	Analysis Requested (check all that apply)	Storage Condition (check only one)	LAB USE ONLY Condition Received	LAB USE ONLY Sample ID
		<input type="checkbox"/> USP<61> <input type="checkbox"/> USP<62> <input type="checkbox"/> Both	<input type="checkbox"/> 25°C <input type="checkbox"/> 4°C <input type="checkbox"/> -20°C	<input type="checkbox"/> Good <input type="checkbox"/> Damaged	
		<input type="checkbox"/> USP<61> <input type="checkbox"/> USP<62> <input type="checkbox"/> Both	<input type="checkbox"/> 25°C <input type="checkbox"/> 4°C <input type="checkbox"/> -20°C	<input type="checkbox"/> Good <input type="checkbox"/> Damaged	
		<input type="checkbox"/> USP<61> <input type="checkbox"/> USP<62> <input type="checkbox"/> Both	<input type="checkbox"/> 25°C <input type="checkbox"/> 4°C <input type="checkbox"/> -20°C	<input type="checkbox"/> Good <input type="checkbox"/> Damaged	
		<input type="checkbox"/> USP<61> <input type="checkbox"/> USP<62> <input type="checkbox"/> Both	<input type="checkbox"/> 25°C <input type="checkbox"/> 4°C <input type="checkbox"/> -20°C	<input type="checkbox"/> Good <input type="checkbox"/> Damaged	
		<input type="checkbox"/> USP<61> <input type="checkbox"/> USP<62> <input type="checkbox"/> Both	<input type="checkbox"/> 25°C <input type="checkbox"/> 4°C <input type="checkbox"/> -20°C	<input type="checkbox"/> Good <input type="checkbox"/> Damaged	
		<input type="checkbox"/> USP<61> <input type="checkbox"/> USP<62> <input type="checkbox"/> Both	<input type="checkbox"/> 25°C <input type="checkbox"/> 4°C <input type="checkbox"/> -20°C	<input type="checkbox"/> Good <input type="checkbox"/> Damaged	
		<input type="checkbox"/> USP<61> <input type="checkbox"/> USP<62> <input type="checkbox"/> Both	<input type="checkbox"/> 25°C <input type="checkbox"/> 4°C <input type="checkbox"/> -20°C	<input type="checkbox"/> Good <input type="checkbox"/> Damaged	

Disclaimer: Samples will be disposed 30 days after analysis completion unless otherwise requested.

Received By:	Client/Vendor #
Received Date:	