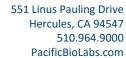


LABORATORY SERVICE REQUEST (LSR) - CUSTOMIZED SERVICES

CLIENT INFO			
		mples requiring the same storage, handling th sample(s). Initiation of sample analysis w	
Sponsor: (Send Report To)		Invoice To:	
Contact Name:		AP Contact Name:	
Company Name:		Company Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Country:		Country:	
Phone:		Invoice To Email:	
Email:		AP Email:	
PBL Quote Number:		AP Phone:	
PO Number:		Credit Card to be used for payment	
TEST APTICI E INEO			
TEST ARTICLE INFO Test Article ID (Please use the exact wording you want to appear in the final report.)			
Lot Number:			
Part Number:			
Other Identifier: (ex. Sample Code)			
Expiration Date:			
Quantity of Test Articles Submitted: (Please indicate the number of units, volume, and/or weight of test article.)			
Physical Description:			
Device	Solid Liquid	☐ Powder ☐ Gel	Other:
Storage Condition:	Controlled Substance:	Hazardous: (include MSDS if samples are hazardous, client will incur charges for disposal of hazards.)	Sample Disposition: (Check one box) (Samples will be discarded 30 days after report unless otherwise indicated)
☐ Room Temperature	□No	☐ Not Hazardous	Return to Sender
☐ 2 to 8°C		☐ Reactive	Carrier:
☐ -10 to -25°C	☐ Yes	Biohazard	Account:
☐ -60 to -90°C	Schedule:	☐ Toxic	☐ Dispose in Municipal waste
		Other:	☐ Dispose in hazardous waste





SERVICE INFO			
Regulatory Treatment: Non-regulatory CGMP CLP			
Complete the following section if GLP:			
GLP Stability Testing and Test Article Characterization (Certificate of Analysis):			
☐ Will be provided during study ☐ Will not be provided during study			
Note: GLP testing requires, by Federal regulation, accurate identification of the test and control articles (e.g., a lot number, batch number or sample code) that allows unambiguous traceability of the tested material. GLP testing also requires that the testing laboratory document characterization of the test and control articles for stability, strength, purity, and composition, or other characteristics which will appropriately define the test or control article. This information is typically provided by the Sponsor and is required for each batch of test or control article tested; this documentation is often in the form of a Certificate of Analysis (C of A). For testing of biomedical devices that contain no drugs, Pacific BioLabs requires documentation of the identity, composition, and stability of the material tested. Failure to provide this information will be noted as noncompliance with GLP regulations in the Final Report.			
Rush Services: No Yes (will incur a 50% surcharge)			
Report Format: PDF PDF and Paper Paper (Note: A fee will apply for paper copy of report.)			
STUDY TITLE:			
The signature of the Sponsor (or Sponsor's representative) below is assurance that 1) the study is appropriate to the Sponsor's project goals and that no alternative <i>in vitro</i> or decreased <i>in vivo</i> animal use procedures are available to meet the stated purpose of the study, 2) the species chosen is appropriate to the stated purpose of the study and that use of alternative species has been considered, 3) the study is not an unnecessary duplication of previous work, and 4) the number of animals used is appropriate to establish biological or statistical significance as required by the study. The Sponsor also specifies that documentation for the above assurances may be obtained from the Sponsor.			
TESTING AUTHORIZED BY (Please Sign): DATE:			
(Signature and date, or electronic signature is required for testing to begin; unsigned LSR forms will not be processed)			