

	USP <797> Media Fill Kit Sample Submission Form Ship Samples To: Cambrex • Attn: Sample Login 104 Gold St. • Agawam, MA 01001 Email: login-ma@cambrex.com	For Internal Use Only	
		Internal #:	
		Rec'd by Date/Time	
		Rec'd Via:	

A Purchase Order (PO) should be submitted with the product to initiate product testing services. Failure to submit completed Sample Submission Forms or to include a PO may result in testing delays.

Please fill out form completely		Requestor		Invoicing (if different from Requestor)	
PO #		Contact		Send Invoice To	
Quote #		Company		Company	
Turnaround Time (TAT)		Address		Address	
<input type="checkbox"/> Standard <input type="checkbox"/> Tier 1 STAT See quote for TATs <input type="checkbox"/> Tier 2 STAT and associated fees <input type="checkbox"/> Tier 3 STAT		City		City	
		State/Zip		State/Zip	
		Phone		Phone	
		E-mail		E-mail	

USP <797> Media Fill Kit Testing Information		
Quantity and Type of Media Fill Kit	<input type="checkbox"/> Low Risk (STR.LAB057)	# of Kits submitted:
	<input type="checkbox"/> Medium Risk (STR.LAB057)	# of Kits submitted:
	<input type="checkbox"/> High Risk (STR.LAB057)	# of Kits submitted:
Kit Lot #¹	Technician Name¹	Fill Date¹

¹ These items are required for processing the samples. If there are additional comments, please document in the comments section.

Sample Handling Information (for media fill kit testing only)			
<input type="checkbox"/> Ambient	<input type="checkbox"/> 2 – 8°C	<input type="checkbox"/> -15 – -25 °C	<input type="checkbox"/> -55 – -95°C

Additional Testing Comments	
<input type="checkbox"/> N/A	

USP <797> Media Fill Kit Purchase (CRS.3013) Information <input type="checkbox"/> N/A		
<input type="checkbox"/> Low Risk	<input type="checkbox"/> HVL1	Quantity Requested:
<input type="checkbox"/> Medium Risk	<input type="checkbox"/> HVM1	Quantity Requested:
	<input type="checkbox"/> HVM2	Quantity Requested:
<input type="checkbox"/> High Risk	<input type="checkbox"/> HVH1	Quantity Requested:

Delivery Method (for media fill kit purchasing only)		
<input type="checkbox"/> Cambrex Courier (Please fill out a Cambrex CRF)	<input type="checkbox"/> FedEx Account #:	<input type="checkbox"/> UPS Account #:

Submission of this executed form and the associated samples for testing signifies your acceptance of the terms and conditions incorporated in the Quote, or if none, Cambrex' general terms and conditions covering these services (See: <http://Cambrex.com/Forms-and-Certificates>).