**Instructions:** This form must be completed electronically using Microsoft Word. Upon completion, please print this form, then sign and date it at the bottom. If you have any questions, please reach your usual contact at NAMSA or a Technical Advisor at +33 478 079 234 for France and +49 6022 50638 00 for Germany. Thank you for your business. **Required fields are bolded**; information in these fields must be completed before your order can be processed. Please complete a separate form for each set of samples submitted.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sponsor Information** | | | | | | | | |
| **Ship To Information** (final report will be mailed to this address) | | | **Bill To Information**  Same as Ship To Information | | | | | |
| **Company Name** |  | | **Company Name** | | | |  | |
| **Contact** |  | | **Address** | | | |  | |
| **Address** |  | | **City, State, Zip** | | | |  | |
| **City, State, Zip** |  | | Country | | | |  | |
| Country |  | | Phone (Accounts Payable) | | | |  | |
| **Phone**/Fax |  | |  | | | | | |
| **E-mail** |  | | **Proposal Number:** | | | | | |
| **Method of Payment**  Purchase Order  **Purchase Order Number:** | | | | | | | | |
| **Test Article Information** | | | | | | | | |
| **Name**\* | |  | | | | | | |
| **Reference\*** | |  | | | | | | |
| **Batch/Code/Lot ID**\* | |  | | | | | | |
| Physical Description\* | |  | | | | | | |
| **Type** | | Choose Type If Other, please describe: | | | | | | |
| **Intended Clinical Use** | |  | | | | | | |
| Countries/Regions that test data will be submitted to | | FDA (US)  Notified Body (Europe)  Other:  NMPA (China)  MHLW (Japan)  Not known | | | | | | |
| **Sterilization\*** | | Sterile – Choose Process  Not Sterile  Aseptically Prepared  NAMSA to Sterilize (Steam – Only available in France – Additional fee will apply)  Choose Time/Temp If Other, please describe: | | | | | | |
| Expiration Date\* | | /     /      (DD/MM/YYYY) | | | | | | |
| Special Instructions (preparation, handling, part to be removed…) | |  | | | | | | |
| Can be Cut | | Yes  No (cutting can expose inner surfaces – cutting will destroy the test article) | | | | | | |
| Is an Absorbent | | Yes  No | | | | | | |
| **Composition** | |  | | | | | | |
| **Safety Data**  Mandatory for liquid, gel, powder, paste, cream and/or if belongs to the type Chemical, Pharmaceutical or Biologic | | MSDS is provided  MSDS is not provided, safety data are indicated in the “Special Instructions” section  Not Applicable, the test article is a solid Medical Device | | | | | | |
| **Quantity Submitted** | |  | | **Storage Conditions\*:** Choose Temperature | | | | |
| **Disposition\*** | | | | | **For test article to be returned:** | | | |
| Discard used and unused test article | | | | | Choose carrier Other: | | | |
| Return unused test article (additional fees will be applied) | | | | | Account #: | | | |
| Return used & unused test article (additional fees will be applied) | | | | | Special handling instructions: | | | |
| **Test Article Extraction Information** | | | | | | | | |
| **Extracts to be Prepared by:** | | Choose Ratio  When needed, NAMSA might adapt the ratio | | | | **Test Article Surface Area\*** | | cm2 |
| **Test Article Weight** | | g |
| **Extraction Conditions**  (the highest temperature that will not degrade the test article is recommended) | | **Cytotoxicity**  Choose Time/Temp  If Other, please describe:  Other conditions to be justified. The extraction time may be less than 24h but no less than 4h | | | | **Other Tests**  Choose Time/Temp  If Other, please describe:  Other conditions to be justified | | |
| \*This information may appear on your final report. | | | | | | | | |

|  |  |
| --- | --- |
| Please print this form and sign. **Signature must be handwritten.** | |
| Sponsor Signature: | Date: |

|  |  |
| --- | --- |
| **Shipping Information** | |
| Please, include a signed copy of this form and ship to the facility as designated below. Thank you for your business. | |
| Germany Facility:   * Chemical Analysis * Chemical Characterization | France Facility:   * *In Vitro* Toxicology * *In Vivo* Toxicology * Antimicrobial and Microbiology Specials * Microbiology (Bioburden, Sterility, LAL) |
| NAMSA Laboratory Services GmbH  Attention: Samples reception  Glanzstoffstr. 1  63906 Erlenbach  Germany | NAMSA  Attention: Samples reception  115 Chemin de l’Islon  38670 Chasse sur Rhône  France |