

SAMPLE SUBMISSION FORM

SEND REPORT TO	SEND INVOICE TO
Company: Address: City, State, Zip: Contact Name: Phone (EXT): E-mail:	<div style="display: flex; justify-content: space-between;"> Same As Report Acct. Payable Address </div> Company: Address: City, State, Zip: Contact Name: Phone (EXT): E-mail:

Date Submitted:

PO#:

Eurofins Quote #:

	QTY	Product	Lot Number	Type of Test	Method to be followed	Specification Reference
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Shipping Conditions:				Sample Storage:		
Ambient/Room Temp		On Ice		Ambient/ Room Temp		Refrigerator (2 to 8 C)
On Dry Ice		On Liquid Nitrogen		Freezer (-10 to -25 C)		Freezer (≤ -75 C)

OOS Investigation: If sample does not meet specification, do you require Eurofins to perform Out-Of-Specification (OOS) Investigation? Yes No

Sample Disposition: Dispose of Sample Return Sample: Shipping Account #:

Eurofins will dispose of sample(s) 30 days post report issue date unless other arrangements are requested.

MoCRA Applicability: Are these sample(s) associated with cosmetic product batch release testing (includes associated raw materials)? Yes No

Rush Service: These samples receive priority handling: If selected a RUSH fee will apply: Yes No

Payment: Payment must be received within 30 days (unless other payment arrangements have been established). The credit hold policy will apply after 30 days (please see Quotation terms).

Final report to be E-mailed to client contact upon QA/QC approval of test results

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