

LABORATORY SERVICE REQUEST- MICROBIAL IDENTIFICATION RiboPrinter® Method

Client Info	Report To <i>(Please include contact name and company info.)</i>		Invoice To <i>(If different than Report To info.)</i>	
	Phone	Fax		P.O.
	Email			Quote

Test Article Info	Test Article ID <i>(Please use the exact wording you want to appear in the final report.)</i>				
	Quantity	Lot No.	Code		
	Storage Conditions	<input type="checkbox"/> 20 to 25°C	<input type="checkbox"/> 2 to 8°C	<input type="checkbox"/> -16 to -24°C	<input type="checkbox"/> -60 to -80°C
	Controlled Substance	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Schedule	
	Hazardous	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Type of Hazard	

(Please include MSDS if samples are hazardous. Client will incur charges for disposal of hazards.)

Return Test Articles	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Carrier _____	Account # _____
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(Client will incur charges for shipping and handling.)

Service	Regulatory Treatment <i>(GLP will incur an additional fee.)</i> <input type="checkbox"/> cGMP <input type="checkbox"/> GLP <input type="checkbox"/> Non-regulatory			
	Rush <i>(Will incur a 50% surcharge.)</i> <input type="checkbox"/> No <input type="checkbox"/> Yes			
	Do You Want Report Date Confirmation? <input type="checkbox"/> No <input type="checkbox"/> Yes			
	Report Format <input type="checkbox"/> Paper <input type="checkbox"/> PDF <input type="checkbox"/> Paper and PDF <i>(First format NC, \$6.00 for each additional.)</i>			
	Archive Options (for Paper Records) All paper records will be scanned and stored at PBL indefinitely by a system that is validated to comply with GMP and GLP regulations. Paper records will be stored by PBL at no charge for the first year after study completion. If no options are selected, default options will take effect. Extended storage will be invoiced annually per Fee Schedule at www.PacificBioLabs.com/archivefeeschedule.asp .			

Non GLP RPT	GLP RPT	Archive Options
<input type="checkbox"/>	<input type="checkbox"/>	Discard (after one year) – Non-GLP Default
<input type="checkbox"/>	<input type="checkbox"/>	Return to Client (after one year) – GLP Default (Shipping charges apply)
<input type="checkbox"/>	<input type="checkbox"/>	Return Immediately to Client (at study completion) – (Shipping charges apply)
<input type="checkbox"/>	<input type="checkbox"/>	Extended Storage by PBL (after one year) - Invoiced annually for continued PBL retention.
<input type="checkbox"/>	<input type="checkbox"/>	Client Default – Previously selected options by Client

Test Procedure	Number of Samples	Sample Identification ¹	TAT (DAYS ²)				Other Instructions
			1	3	7	14	
	1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	9		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

¹ Test Article Identification for Final Report.

² Turn Around Time in Business Days

OTHER TESTS/SPECIAL INSTRUCTIONS

TESTING AUTHORIZED BY (Please sign) _____ **DATE:** _____