



RECEIPT OF SAMPLES

Date:

Company Name:

Tax Identification Number (TIN):

Company Physical & Postal Address:

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Phone Contacts:

E-mail Address:

Delivered by (Name): (Contact):

Signature:

Description of Samples: (Type, Batch, Expiry & Manufactured dates, etc)	Chemiphar Identification no.	Test Parameters

Terms and conditions

Submission of samples for analysis implies that the customer has acknowledged, observed, and accepted the prices and conditions for analysis including the parameters identified by an Asterix () which are to be subcontracted.*

The results or report pertaining to this contract is confidential information and will not be exposed or submitted to a third party without the customer's consent unless required by law or authorized by contractual arrangements.

The customer shall, unless prohibited by law, be notified –by email - of the confidential information that has been shared with the 3rd party.

RECEIPT OF SAMPLES

Description of Samples: (Type, Batch, Expiry & Manufactured dates, etc)	Chemiphar Identification no.	Test Parameters

Note:

The following parameters will be analysed using a method/technique different from the accredited one due to either breakdown of equipment or lack of consumables

	Internal code/ Technique		Alternative method/ technique to be used		Internal code/ Technique		Alternative method/ technique to be used
1.	AAS-wat-NaK		MPAES	7.	FIMS-food/feed-Hg		MPAES
2.	AAS-wat-CaMg		MPAES	8.	GF-AAS-food/feed-Cd		MPAES
3.	GF-AAS-wat-Cd		MPAES	9.	GF-AAS-food/feed-Pb		MPAES
4.	FIMS-water-Hg	√	Subcontracted	10.			
5.	AAS-food/feed-NaK		MPAES	11.			
6.	AAS-food/feed- CaMg		MPAES	12.			

Name: **Signature:**

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