

Template

“Insert Your Institution Information Here”

Not Responsible for Investigator's Use

Reagent/Supply Shipping Receipt & Verification

(Refer to SAIC-Frederick-Q003)

Reagent/Supply: 4-Formyl-N,N,N-trimethylanilinium triflate

Expiration Date: _____

Assigned Internal Tracking Number (ITN): SS-PRE-_____

Manufacturer's Assigned Lot Number: _____

Certificate of Analysis Received? Y N N/A

Inspection of Shipment:

Date of Package Arrival	Visual Inspection Prior to Opening	Visual Inspection Upon Opening	Shipment Acceptable or Returned and Reason Why

Inspected By: _____ Date: _____
Signature

Date Quarantined: _____

Manufacturer's Certificate of Analysis attached? Y N N/A

SOP References for Identity Tests as Indicated in the IND (Attach all test data to this form):

Parameter	Test Methodology	Specification	C of A Verification	Comments
Identity	Appearance	White to off-white powder	Y N N/A	
Identity	1H NMR	Confirm	Y N N/A	

Verified By: _____ Date: _____
Signature

Released By: _____ Date: _____
Signature

4-Formyl-N,N,N-trimethylanilinium triflate Shipping Receipt and Verification

Form SR-PRE

Supersedes:

Version: V1

Effective Dater: 12/11/2013

Approved by: _____ Date: _____

Confidential