Template Provided By:

Cancer Imaging Program

National Cancer Institute

Reagent/Supply Shipping Receipt & Verification

(Refer to GEN-Q003)

Reagent/Supply: **Limulus Amebocyte Lysate (LAL) Reagent** **Expiration Date: _____**

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

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

Does the Certificate of Compliance/Analysis state that the Limulus Amebocyte Lysate (LAL) Reagent meets the manufacturer's written requirements for sterility, moisture, pH, and endotoxin contamination and that it has been released for sale by the FDA? Yes ____ No ____

SOP References for Identity Tests as Indicated in the IND (Attach all test data to this form**):** Refer to SOP GEN-Q114.

Verified By: _____ Date: _____

Signature

Released By: _____ Date: _____

Signature

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