

Fill out this form completely and submit with test article(s). Any missing information will delay the processing of the test article(s).

Company _____ Contact name _____

Contact Fax # or E-mail address (for receipt of this form) _____

Company telephone number _____

Number of test article(s) in this shipment _____ P.O. number _____

Check Test Method:

Rush Assay (charges doubled) YES

HSSA (Human Sperm Survival Assay or Sperm Motility Assay): 24-hours 48-hours 72-hours

SM Sperm Motility Recovery Index (SMRI) SPA (Sperm Penetration Assay)

SC (Sperm Cryosurvival)

Other Specify sperm assay requested and duration: _____

Sponsor Test Article Specification: _____

NOTE: When sending MULTIPLE test article LOTS indicate the following: Test Individually Test Pooled

**IF A LOT CONSISTS OF MORE THAN ONE TEST ARTICLE, PLEASE INDICATE THE NUMBER TO BE POOLED AS ONE ASSAY

Test Article Description:	Reference Number:	Lot Number:	**Number Pooled:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Set-up Instructions: _____

Do these instructions deviate from your current QCP/SOP? Yes No

Recommended method of test article disposal: _____

Sponsor Signature _____ Date _____

To be completed by Embryotech™ Laboratories Inc. and faxed or emailed to Sponsor

Receipt date: _____ Expected completion date: _____

ELI Accession number: _____ Condition of Shipment: Good Damaged (Explain)

Signature: _____ Date: _____

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