QA Testing

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Pharmaceutical Service & Government

Sample No: 1 | Batch: 1 | Expiry Date: 1 | Sample Size: 1

Sample Name: [illegible]
Batch No: [illegible]
Supplier: [illegible]
Manufacturer: [illegible]
Sampling Date: [illegible]
Received Date: [illegible]
Analysis Date: [illegible]
Reporting Date: [illegible]

CAPSULE – Chromatographic Analysis

Column: [illegible] | Mobile Phase: [illegible] | Flow Rate: [illegible] | Detector: [illegible]
Standard Solution: [illegible] | Sample Solution: [illegible] | Injection Volume: [illegible] | Run Time: [illegible]

Analyte	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]