



ZUMA PHARMA LLC
Parkent, Tashkent, Uzbekistan

Format No.

SOP/QC/015-F10

Revision No.

00

Effective Date

CONTROL SAMPLE REQUEST FORM

Item Name		Date of Receipt	
B. No.		A.R. No	
Mfg. Date		Exp. Date	
Date of storage		Storage Quantity	

Reason for withdrawn:

Withdrawn By	Checked By	Approved By
Sign./Date	Sign./Date	Sign./Date

	Prepared By	Checked By	Approved By
Sign. /Date			