



STABILITY STUDY TERMINATION FORM

Step 1: Client Information

Date: \_\_\_\_\_ Requested by: \_\_\_\_\_

Company: \_\_\_\_\_ Avatar Client Code: \_\_\_\_\_

Contact: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Step 2: Protocol Information

Document: \_\_\_\_\_ Title: \_\_\_\_\_

Lot Number(s): \_\_\_\_\_

Step 3: Final Destination of Stability Samples

Shipping to: _____ _____ _____ _____ _____	Contact: _____ Phone: _____ Fax: _____ Email: _____
Courier: _____ Courier Account #: _____ Desired ship date: _____	Special Handling: _____ Temperature: _____

Signatures:

Client: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Avatar: \_\_\_\_\_ Date: \_\_\_\_\_  
Area Manager

Avatar: \_\_\_\_\_ Date: \_\_\_\_\_  
Quality Assurance