	Form: Sample Transfer Protocol	
	Valid since: October 2017	Version: V 1.0


8.4 ANNEX 4

Sample Transfer Protocol (Manifest)



This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 733032.

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Developed by: IBMT, KI, ISCIII, JSI

	Form: Sample Transfer Protocol	
	Valid since: October 2017	Version: V 1.0

Sample Transfer Protocol (Manifest)

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Provider

Name of the institution:		
Country:		
Partner acronym in HBM4EU: (if available)		
Person in charge	Name:	
	e-mail:	
	phone:	

Receiver

Name of the institution:		
Country:		
Partner acronym in HBM4EU: (if available)		
Person in charge	Name:	
	e-mail:	
	phone:	

Shipping details

Sample matrix:		Shipping conditions:	
Number of samples:		<input type="checkbox"/> Ice Pack	<input type="checkbox"/> Dry ice <input type="checkbox"/> Liquid nitrogen
Shipment number:		Person in charge	
Date of shipment:		Note	
Time of shipment:			

Checklist Provider

Did you sent all required legal and ethics documents to Task 1.5 leader?	<input type="checkbox"/> yes	<input type="checkbox"/> no
Is the receiver informed and are all details regarding shipping clarified?	<input type="checkbox"/> yes	<input type="checkbox"/> no
Did you package and label your shipment conforming to the specifications of the SOP?	<input type="checkbox"/> yes	<input type="checkbox"/> no
Did you add a temperature logger?	<input type="checkbox"/> yes	<input type="checkbox"/> no
If no : Did you check the temperature directly on the sample before shipping?	<input type="checkbox"/> yes	<input type="checkbox"/> no
If yes : Please specify temperature!	°C	

Checklist Receiver

Date of receipt:		
Time of receipt:		
Person in charge:		
Packaging in sound condition?	<input type="checkbox"/> yes	<input type="checkbox"/> no
If no : Please specify!		
Shipping temperature maintained during transport?	<input type="checkbox"/> yes	<input type="checkbox"/> no
If no : Please specify!	°C	

