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| **Form Group:** | Contributing Scientist Report/Data Audit |
| **Packet ID:** | CSRA- |
| **Audit Type Chem/Crop/PR#(ID) :** |  |
| **Location:** |  |
| **Date:** |  |
| **Closed:** |  |

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| **A. Cover Page****Yes, No, N/A** |
| **Study Title:** |  |
| **Lab/Processing/Seed Treatment ID#:** |  |
| **1. PR# on Report:** |  |
| **2. Title of Report Accurate:** |  |
| **3. Author (s) Presented:** |  |
| **4. Report Date:** |  |
| **5. Sponsor Named:** |  |
| **6. Study Director (Name):** |  |
| **7. Research Director (Proc, Seed Trt., etc) (Name &** **Location):**  |  |
| **8. Study Timetable:** |  |
| **a. Initiation Date:** |  |
|  **b. Experimental Termination Date:** |  |
| **B. Good Laboratory Practice (GLP) Statement****YES,NO,N/A** |  |
| **9. Exceptions to the GPL Standards listed:**  |  |
| **10. Research Director’s Signature (s):**  |  |
|  **C. Quality Assurance Statement** **YES,NO,N/A** |  |
| **11. QA Statement Complete:** |  |
| **a. Date (s) of Inspection (s):** |  |
| **b. Name of Person (s) Inspecting:** |  |
| **c. Date Reported to SD and TFM:** |  |
| **d. Signed and Dated:** |  |
| **12. Signed & dated:** |  |
|  **D. Study Participants****YES,NO,N/A** |  |
| **13. All Study Participants Listed:** |  |
| **E. Table of Contents****YES,NO,N/A** |
|  **14. Table of Contents to contain all Sections of Report:** |
| **a. List of Tables:** |  |
| **b. List of Figures:** |  |
| **c. Appendices:** |  |
| **d. Page numbers included and accurate:** |  |
| **F. Archive Statement**  |  |
| **15. Data Archive Location Provided & According to the Protocol:** |  |
| **G. CSR Content****YES,NO,N/A** |
| **16. Objective(s) / Introduction included:** |  |
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| **17. Materials/Methods:** |
| **a. Methods of Trt. /Processing, etc. Presented :** |
| **b. Test/Reference substance(s) (Name, Source, lot#, Purity, Expiration Date, Storage:** |
| **c. Reagents:** |
| **d. Equipment (s) used Identified:** |
| **e. Preparation of Test/Reference Substance(s) and Fortification Solutions Adequately Documented:** |
| **f. Preparation of Reagents Described:** |
| **g. Description of Sample Preparation (sub-samples, chopping or grinding used for analysis):** |
| **h. Analytical Procedure Named and Available:** |
| **i. Instrument(s) and Parameters Used:** |
| **j. Limits of Detection and Quantitation (defined in SOP):** |
| **k. Method of Quantitation (e.g., software) Sample Calculation Presented. :** |

**18. Sample Inventory and History:** |  |
| **a. Test System:** |  |
| **i. Commodity (ies) of Fractions:** |  |
| **ii. Field ID#s:** |  |
| **iii. Field Research Director name(s):** |  |
| **iv. Total # of Samples:** |  |
| **v. Form(s) of Sample (whole, ground, etc.):** |  |
| **b. Storage (storage period and temp.) for Samples & Extracts:** |  |
| **C. Relevant Dates (e.g., harvest, sampling, application(s), Processing, Fortifications, Extractions, Analyses, etc.):** |  |
| **d. Were samples stored in appropriate form :**  |  |
| **19. Results and Discussion** |  |
| **a. Processing flow chart/mass balance presented, as applicable:** |  |
| **b. Results have been accurately transcribed to the study report:** |  |
| **c. All relevant raw data were presented:** |  |
| **d. Use of correction factors clearly presented.**  |  |
|  |  |
| **e. Explanation/Description of Calculation Technique Presented (if automated?) are formulas visible:** |  |
| **f. Sample Calculations for Fortified Control Presented (at a minimum):** |  |
| **g. Calibration curves or bracketing standard(s) values presented:****h. Clearly labeled and representative chromatograms/spectra presented:** |  |
| **i. If corrected values reported are the apparent values are also presented?:** |  |
| **H. Appendices****YES,NO,N/A** |
| **20. Test/Reference Substance Characterization:** |  |
| **a. Contains GLP Status and Archival Location:** |  |
| **b. Copy of Certificate of Analysis Presented:** |  |
| **I. Data****YES,NO,N/A** |  |
| **21. Data properly signed/initialed and dated:** |  |
| **22. Data changes GLP compliant:** |  |
| **23. Data Pages is Identified by Study # and Paginated:** |  |
| **24. Raw Data Complete:** |  |
|  **J. Protocol/SOP****YES,NO,N/A** |
| **25. Protocol and all Applicable Changes Present:** |  |
| **26. Protocol Followed or All Deviations Issued and Approved:** |  |
| **27. All SOPs Followed or Deviations Issued and Approved:**  |  |
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