

Form: II-GA
Regulation Section: 16(c)

CERTIFICATE OF ANALYSIS

Sample Reference No.:

1. Name of the Inspector/sampler:
2. Date of receipt:
3. Name(s) of Active ingredients contained in the sample:
.....

4. Details of analysis:

Name of the Drug	Test Parameter and Pharmacopeial Standard(s)	Limit	Result

In the opinion of the undersigned, the sample referred to above is of/not of standard quality.

Name & signature
Government Analyst

Date: