**Client Audit Request Form**

Thank you for your audit request. In order to expedite your request, some critical information is required. Please take a moment to fully and accurately complete this form and forward to the Alcami Corporation personnel listed below. Upon completion of the form, you will receive an email confirmation of an agreed upon date, and any pertinent pre-audit information. Please forward your audit plan at the earliest convenience.

We request your completion of this form **at least 30 days** prior to your desired audit date(s).

Audits are limited to **not more than 2 auditors and 2 days in length** at a mutually agreed upon time.

Thank you for choosing Alcami for your business needs, and we look forward to seeing you.

Please forward completed form to:

[Client-Audit-Requests@alcaminow.com](mailto:Client-Audit-Requests@alcaminow.com)

Alcami Corporation Quality Audit Representative(s)

**Client Audit Request Form**

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| **Company Name** and **Address** |  |
| Desired and alternate audit dates |  |
| Number of Auditors (**NMT 2**) |  |
| **Names** and **Titles** of Auditors  (Please identify all consultants if applicable) |  |
| Contact information for Auditors (**email** and **telephone**) |  |
| Food Restrictions of Auditors (if any) |  |
| Have you done business with Alcami in the past? | Yes No |
| Do you have a Confidentiality Agreement in place with Alcami Corporation? ***Note: if a consultant is being utilized for the audit, a***  ***bridging letter is required.*** | Yes No  Not Known |
| Audit Type (Select all that apply) | Routine  New Business / Qualification For Cause  Due Diligence Mock PAI |
| Auditing Regulations (Select all that apply) | **Country** US EU  Canadian  Other, please specify  **Regulatory Area**  GMPs  Other, please specify |
| Alcami Site(s) and areas of interest to be Audited | **Wilmington, NC** (Formulations, Analytical, Microbiology, Stability, Sterile Visual Inspection, Packaging, Distribution, and Solid Dose Manufacturing)  **Manufacturing Services** Solid Dose Manufacturing Packaging  Distribution  **Laboratory Services** Sample Log-In Area Stability Storage Services Microbiology  Wet Chemistry / Raw Material Testing QC Stability / Release Testing Analytical Development Biotechnology (large molecule) Physical Chemistry  **Product Formulations Development (R&D)**  Sterile Non-sterile  **Durham, NC** (Analytical Services) |

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|  | **Charleston, SC** (Sterile Manufacturing, Visual Inspection, Support Laboratories - In-process testing, Microbiology)  **Manufacturing Services** Sterile Manufacturing Visual Inspection  **Laboratory Services**  Support Labs – In process testing Microbiology  **St. Louis, MO** (Analytical Chemistry, Microbiology and Stability Programs)  **Laboratory Services** Analytical Chemistry Microbiology Stability Storage  **Germantown, WI** (Analytical, Stability, Distribution and API Manufacturing)  **Manufacturing Services** API Manufacturing Distribution  **Laboratory Services**  Stability Storage Services  Wet Chemistry / Raw Material Testing QC Stability / Release Testing Analytical Development |
| Product Name and Lot Numbers / Material Numbers / Project Numbers / Batch Records / Study Protocol Numbers / Other documents to  be reviewed etc. pertaining to the audit |  |

Name and title of person completing this form