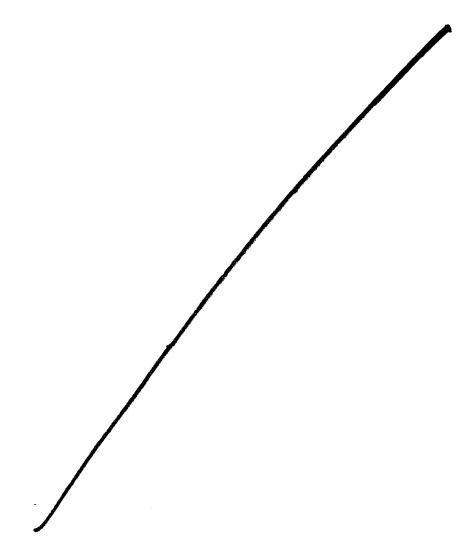
Validity Testing Information Part I

Laboratory Name: Address:

Responsible Person: W Randy Lynn, PhD (Printed Name)



I certify that the answers and information provided are true and correct as of this date. Any false, fictitious, or fraudulent answers or information provided may violate Federal Law and could subject me to prosecution, monetary penalties, or both (Sec 18 U.S.C. 1001; 31 U.S.C. 3801-812).

Signature Responsible Person

Printed Name, Responsible Person