

Quality & Safety

Complaint form AgriStrip

BIOREBA

Name:

Address:

Phone:

Fax:

Email:

to be sent to the distributor in your country (where available) or directly to BIOREBA AG in Switzerland. Forms filled electronically might be sent directly by Email by clicking on the SEND button below.

Description of the problem:

AgriStrip Product

Name (pathogen):

Art. No.

Lot No.

Exp. date

When received ?

When opened first ?

How was it stored ?

Problem since

first use (Date)

later use (Date)

Other AgriStrip received with same shipment?

Did they work well ? yes no

What kind of sample did you test?

What buffer did you use?

Host?

Type A

Fresh / frozen?

B

Tissue: leaf, stem etc,?

C

Sample / buffer ratio?l

other

We would like to have satisfied customers. Your information may help us finding the cause of the problem. Therefore, we appreciate very much your cooperation.

1/1

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