



AUDIT CERTIFICATE

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|---------------------|--|------------------------|---|
| Auditee name | Chemical-analytical laboratory QBioLab at LLC "Research Center Eco safety" | Auditee address | 196143 St. Petersburg Yuri Gagarin ave. 65 |
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This is to certify that the following quality assurance audit has been performed on the dates indicated below and appropriate actions have been addressed with reference to ICH Good Clinical Practice Guideline.

| Audit type | <input type="checkbox"/> Internal audit <input checked="" type="checkbox"/> Vendor audit <input type="checkbox"/> Investigational site audit <input type="checkbox"/> Other _____ | Sponsor description | <input checked="" type="checkbox"/> <i>Not applicable</i> | Protocol code or number | <input checked="" type="checkbox"/> <i>Not applicable</i> | | | | | | | | | | | | | | | | |
|--------------------------|--|---|--|--------------------------------|---|----------------------|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|--|--|--|
| Audit attendees | <table border="1" style="width: 100%; text-align: center;"> <tr> <th style="width: 50%;">Name Surname</th> <th style="width: 50%;">Role</th> </tr> <tr> <td>Mariia Belavina</td> <td>Auditor</td> </tr> </table> | Name Surname | Role | Mariia Belavina | Auditor | Audit date(s) | 07/04/2022 _____ dd /mm / yyyy | | | | | | | | | | | | | | |
| Name Surname | Role | | | | | | | | | | | | | | | | | | | | |
| Mariia Belavina | Auditor | | | | | | | | | | | | | | | | | | | | |
| Audit reference # | Audit type short name <input type="checkbox"/> IA (Internal audit) <input checked="" type="checkbox"/> VA (Vendor audit) <input type="checkbox"/> ISA (Investigative site audit) <input type="checkbox"/> OTH(Other) | Audit date(or start date) | Protocol code (without spacing) or <input checked="" type="checkbox"/> not applicable (leave blank) | | | | | | | | | | | | | | | | | | |
| | | <table border="1" style="margin: auto;"> <tr> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">5</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">4</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">2</td> </tr> <tr> <td style="text-align: center;">d</td> <td style="text-align: center;">d</td> <td style="text-align: center;">m</td> <td style="text-align: center;">m</td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> <td style="text-align: center;">y</td> </tr> </table> | 1 | 5 | 0 | 4 | 2 | 0 | 2 | 2 | d | d | m | m | y | y | y | y | | | |
| 1 | 5 | 0 | 4 | 2 | 0 | 2 | 2 | | | | | | | | | | | | | | |
| d | d | m | m | y | y | y | y | | | | | | | | | | | | | | |

| Issued by: | | |
|---------------------|--|------------------|
| <i>Name Surname</i> | <i>Date of Signature</i> | <i>Signature</i> |
| | 15 APR 2022 _____ dd / mm / yyyy | |

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