Exempt Chemical Preparations

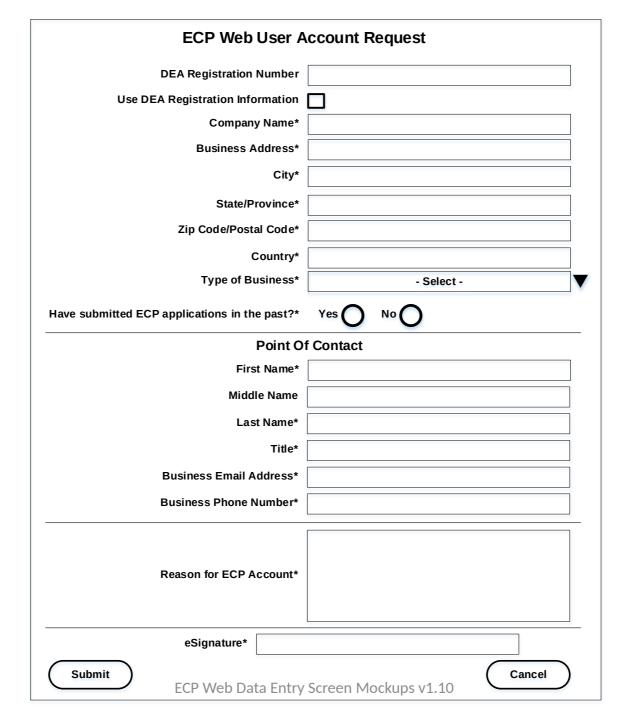
Web Data Entry Screen Mockups v1.10

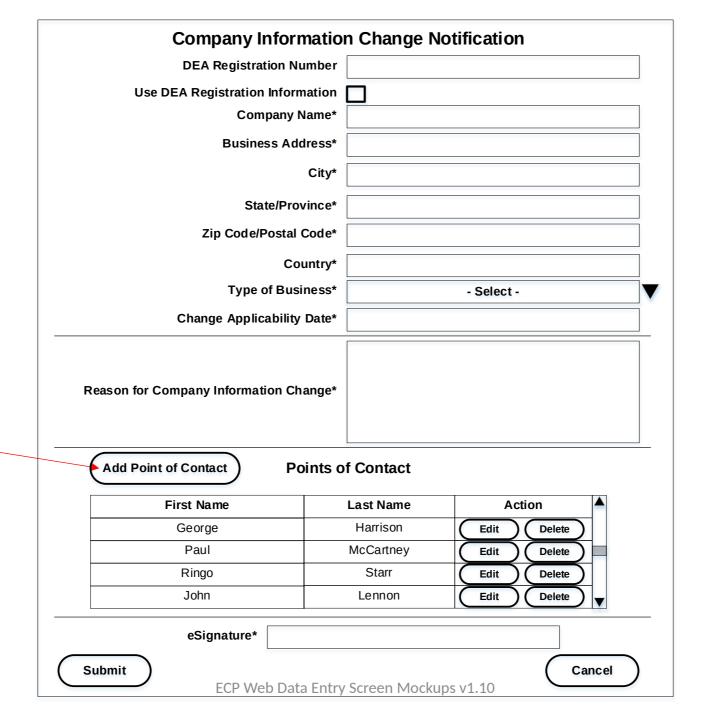
Nomenclature

- Mandatory Data *
- Read Only Field

ECP Data Entry Forms

- Web User Account Request
- Company Information Change Notification
- Letter of Exemptions Request
- Online Question
- ECP Removal Request
- ECP Importer/Exporter Semi Annual Report
- ECP Application
- Approved Solvent Modifications Request





5/27/2021

Opens Add Point Of

Contact Dialog Box

Add/Edit Poi	nt Of Contact
First Name*	
Middle Name	
Last Name*	
Title*	
Business Email Address*	
Business Phone Number*	
Save	Cancel

ECP Letter of Exemptions Request DEA Registration Number Company Name* **Business Address*** City* State/Province Zip Code/Postal Code Country **Point Of Contact** First Name* Middle Name Last Name* Title* **Business Email Address* Business Phone Number*** Reason for Letter of Exemptions Request* Add Exempt **Exempt Chemical Preparations** Chemical Preparation **Product Name** Form **Application Date** Action Control Product One Amber Vial 5ml 10/22/2015 Delete Control Product Two 10/22/2015 Amber Vial 15ml Delete 10/22/2015 Control Product Three Amber Vial 10ml Delete Control Product Four Amber Vial 25ml 10/22/2010 Delete eSignature* Submit Cancel ECP Web Data Entry Screen Mockups v1.10

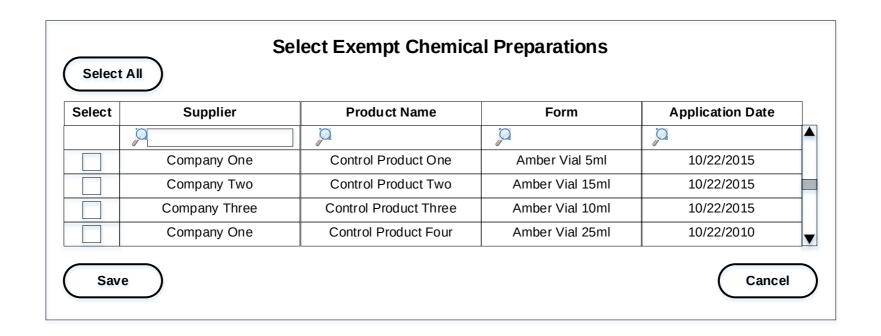
Prefilled with Company's account information

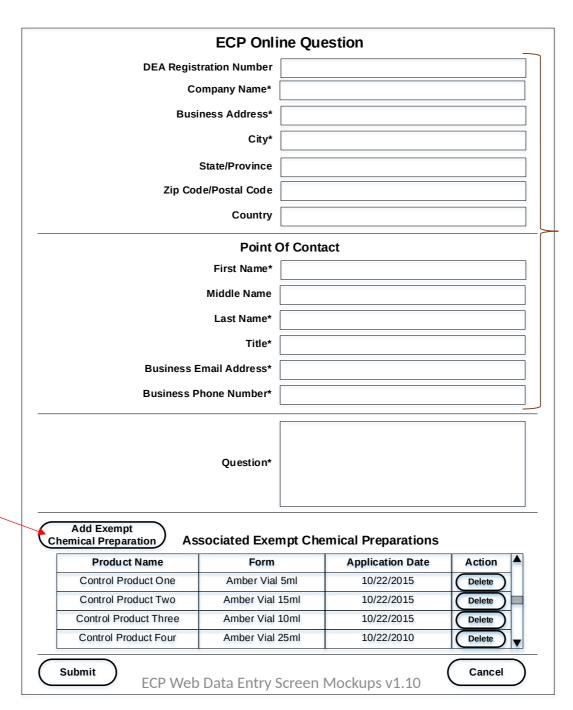
Dialog Box

Opens Select Exempt

Chemical Preparations

Displays all of the Exempt Chemical Preparations associated with this Company



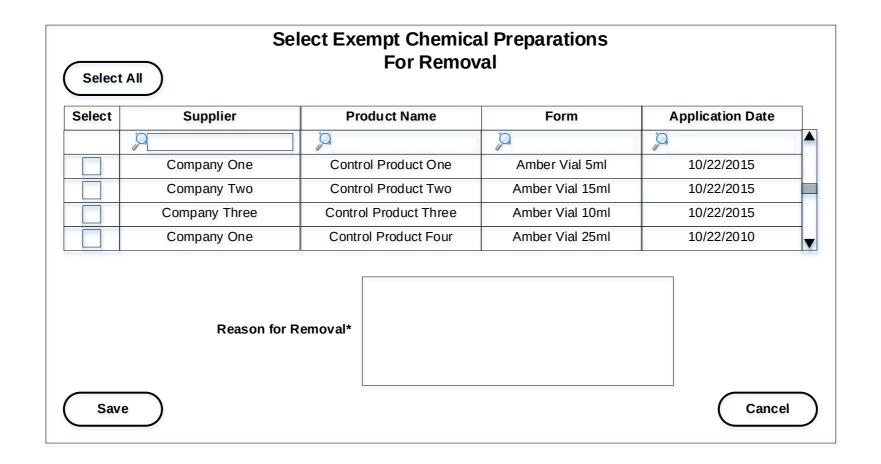


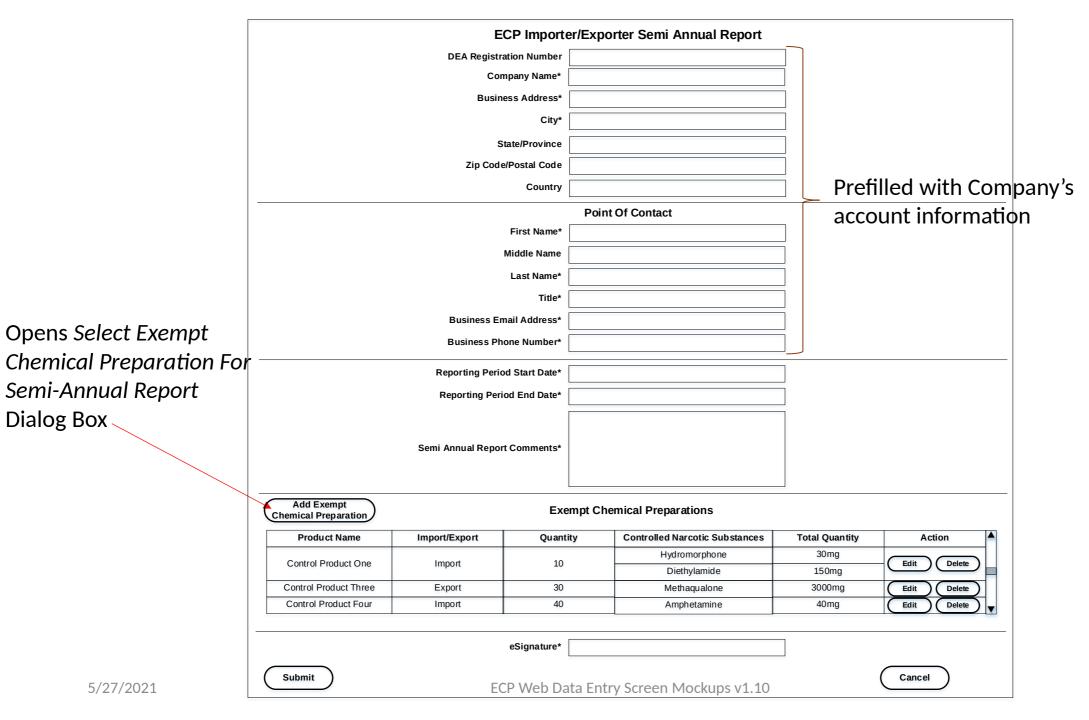
Prefilled with Company's account information

Opens Select Exempt Chemical Preparations Dialog Box

	ECP Removal Request								
	DEA Registration Number								
	Company Name*								
	Business Address*								
		City*							
		L							
		State/Province							
		Zip Code/Postal Code							
	Country						P	refilled with Co	mpany's
		Point Of Contact				account information		ntion	
		1							
	Middle Name								
Opens Select Exer	xemnt Last Name*								
			Title*						
-	sar i reparations i er								
Removal Dialog B	OX	Business Ema							
		Business Phor	ne Number*						
	Add Exempt Chemical Preparations to Remove								
	Supplier	Product Name	For	rm	Application Date	Reason Fo	Removal	Action	
	Company One	Control Product One	Amber Vial 5ml		10/22/2015	No Longer Manufactured Edit Delete			
	Company Two	Control Product Two	Amber Vial 15ml		10/22/2015	No Longer Manufactured			
	Company Three	Control Product Three	Amber V		10/22/2015	No Longer M		Edit Delete	
	Company One	Control Product Four	Amber V	'ial 25ml	10/22/2010	No Longer M	anufactured	Edit Delete ▼	
		eSignature*							
	Submit							Cancel	
5/27/2021		FC	P Web Data	a Entry Scr	een Mockups v1.10				

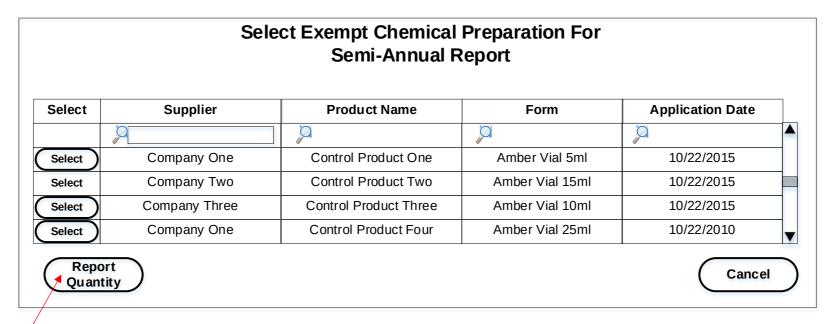
• Displays all of the Exempt Chemical Preparations associated with this Company





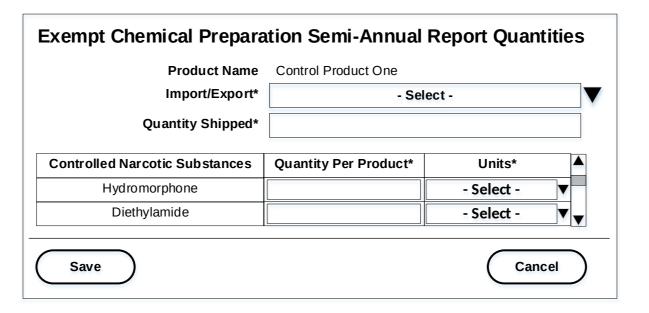
5/27/2021

- Displays all of the Narcotic Exempt Chemical Preparations associated with this Company
- As each Narcotic Exempt Chemical Preparation is reported, it is removed from the list of available Narcotic Exempt Chemical Preparations to select



Opens Select Exempt Chemical Preparation Semi-Annual Report Quantities Dialog Box

- Displays the selected Narcotic Exempt Chemical Preparation
- If the system already knows the Controlled Narcotic Substance Quantities Per Product for the Narcotic Exempt Chemical Preparation, then those values will be prefilled. If not, it is stored for the next Semi-Annual Report



Exempt Chemical Preparation Application

New Application for Liquid Preparation

Exempt Chemical Preparations Application DEA Registration Number Company Name **Business Address*** City* State/Province Zip Code/Postal Code Prefilled with Company's Country **Point Of Contact** account information First Name* Middle Name Last Name* Title* Business Email Address* **Business Phone Number*** Application Type* **Exempt Chemical Preparation** Exemption Justification^{*} Add Exempt Candidate Exempt Chemical Preparations* Chemical Preparation Supplier **Product Name** Form **Controlled Substances** Action Hydromorphone Control Product One Amber Vial 5ml Edit Delete Company One Diethylamide Company Two Control Product Two Amber Vial 15ml Methaqualone Delete Company Three Control Product Three Amber Vial 10ml Amphetamine **Upload Document Supporting Documentation Uploaded Files** Description Action Company Word Document.docx Word Document Description Company Slide Deck.pptx Slide Deck Description Company PDF.pdf PDF Document Description Company Spreadsheet.xlsx Spreadsheet Description eSignature* ECP Web Data Entry Screen Mockups v1.10 Submit Cancel

5/27/2021

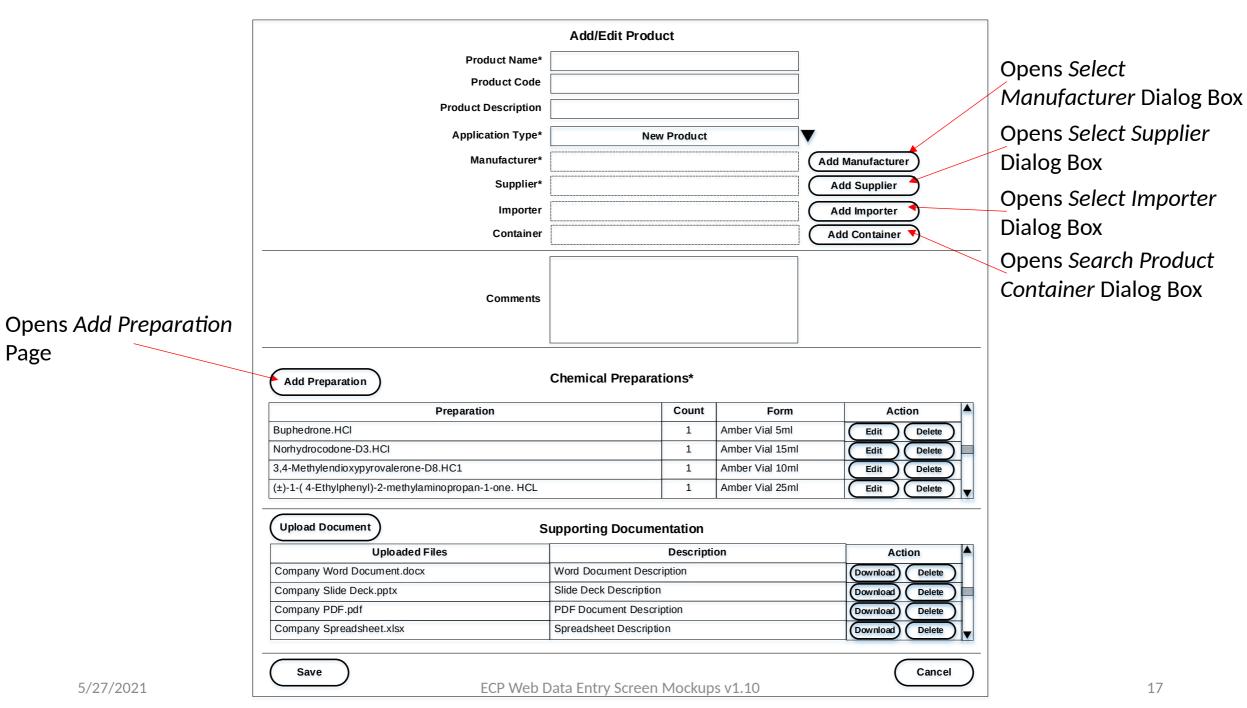
Dialog Box

Opens Add Product Page

Opens Upload Document

• Allows a user to select a local document and upload it to the application



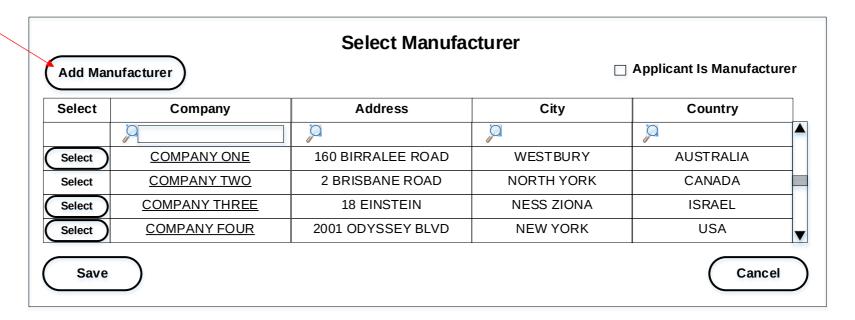


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Page

Displays all of the Manufacturers associated with this Company

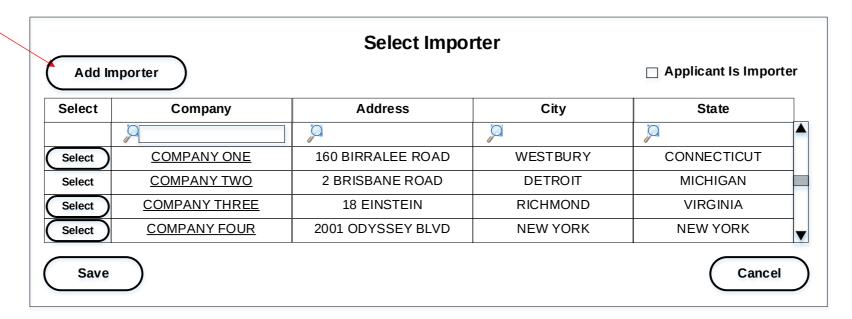
Opens Add Manufacturer



	Add/Edit Manufacturer	
DEA Registration Number		
Company Name*		
Business Address*		
City*		
State/Province		
Zip Code/Postal Code		
Country		
Upload Document)	Supporting Documentation	
Uploaded Files	Description	Action
Company Word Document.docx	Word Document Description	(Download) (Delete
Company Slide Deck.pptx	Slide Deck Description	(Download) (Delete
Company PDF.pdf	PDF Document Description	Download Delete
Company Spreadsheet.xlsx	Spreadsheet Description	Download Delete
Save		Cancel

• Displays all of the Importers associated with this Company

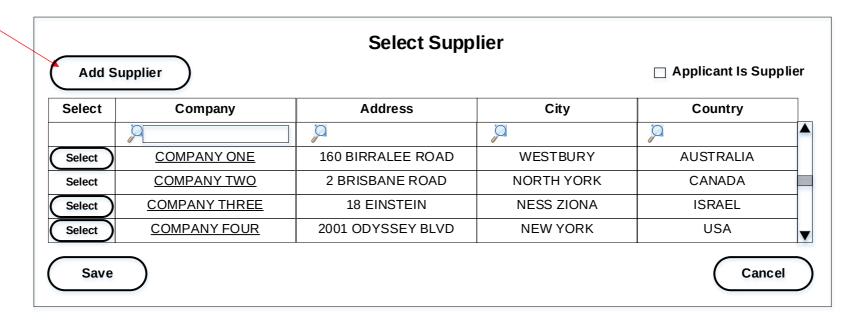
Opens Add Importer



	Add/Edit Importer	
DEA Registration Number		
Company Name*		
Business Address*		
City*		
State*		
Zip Code*		
Comments		
Upload Document S	upporting Documentation	
Uploaded Files	Description	Action
Company Word Document.docx	Word Document Description	Download Delete
Company Slide Deck.pptx	Slide Deck Description	(Download) (Delete
Company PDF.pdf	PDF Document Description	(Download) (Delete
Company Spreadsheet.xlsx	Spreadsheet Description	Download Delete
Save		Cancel

Displays all of the Suppliers associated with this Company

Opens Add Supplier



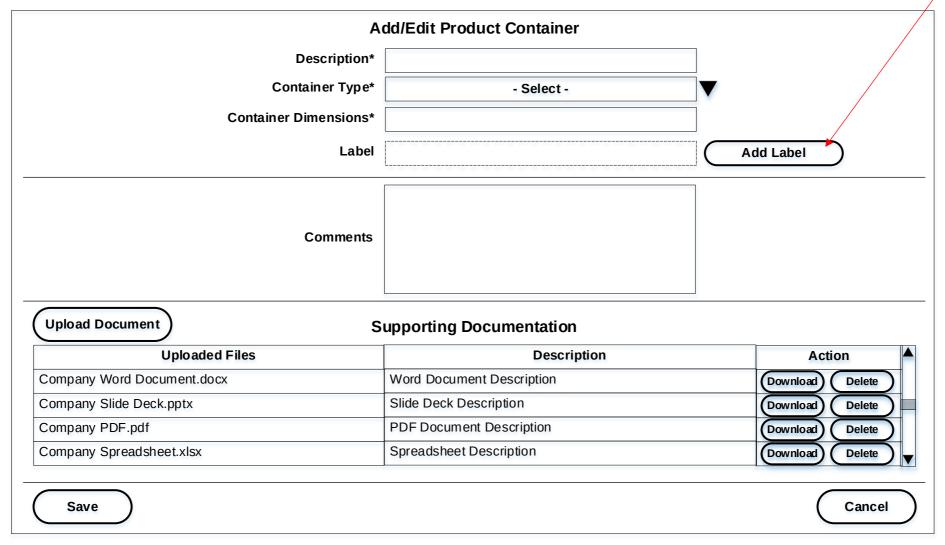
	Add/Edit Supplier	
DEA Registration Number		
Company Name*		Ī
Business Address*		
City*		
State/Province		Ī
Zip Code/Postal Code		
Country		
Upload Document S	supporting Documentation	
Uploaded Files	Description	Action
Company Word Document.docx	Word Document Description	Download Delete
Company Slide Deck.pptx	Slide Deck Description	Download Delete
Company PDF.pdf	PDF Document Description	Download Delete
Company Spreadsheet.xlsx	Spreadsheet Description	Download Delete
Save		Cancel

Displays all of the Product Containers associated with this Company

Opens Add Product
Container Dialog Box



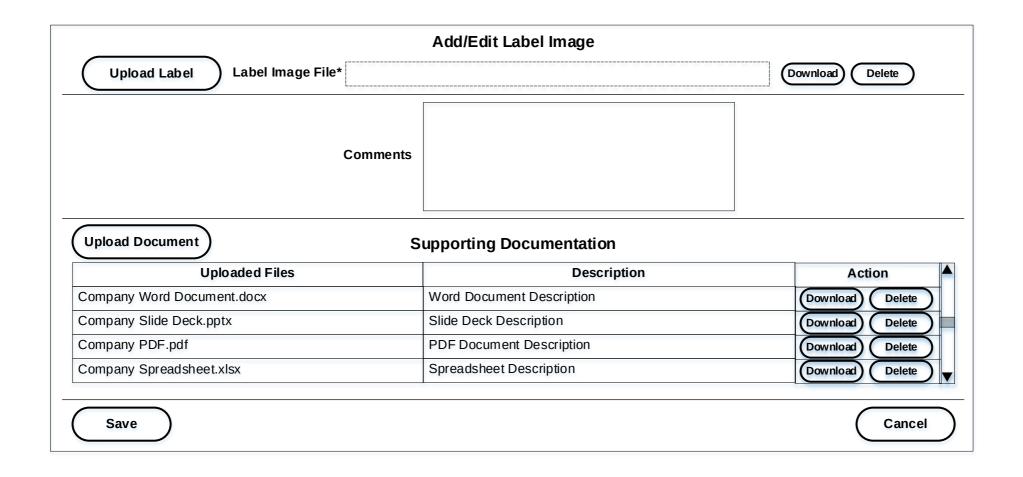
Opens Search Product Labels Dialøg Box



• Displays all of the Product Labels associated with this Company

Opens *Upload Label*Dialog Box

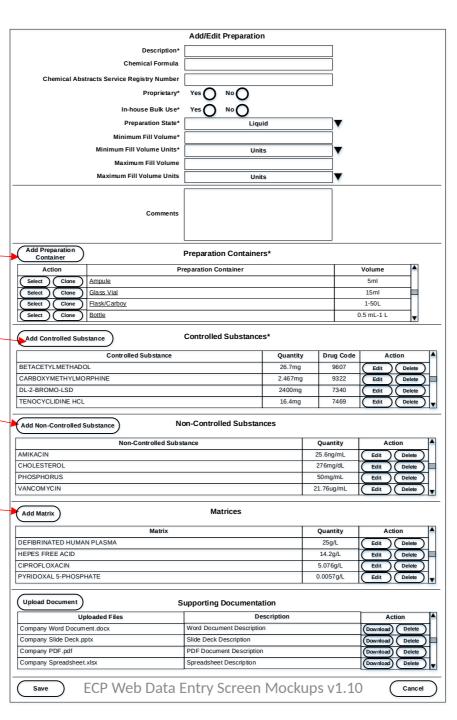




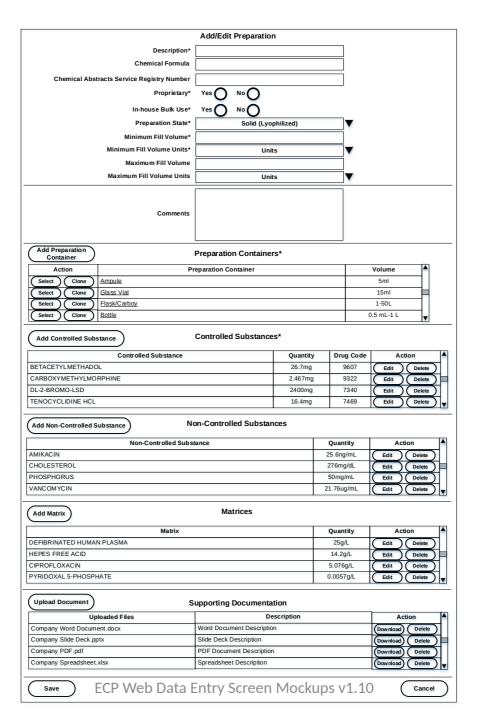
Opens Search Preparation Container Dialog Box

Opens Search Controlled Substances Dialog Box

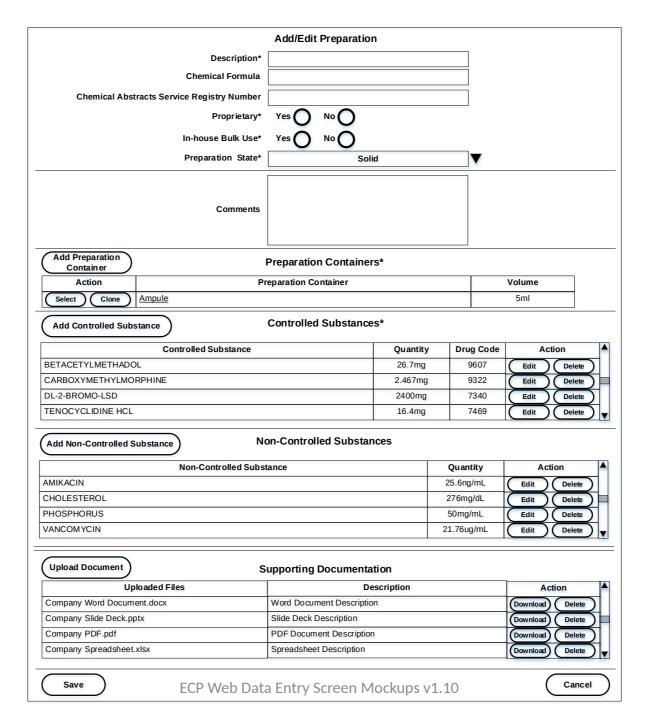
Opens Search Non-Controlled Substances Dialog Box Opens Search Matrices Dialog Box



This is an example of the Solid (Lyophilized)
Preparation screen

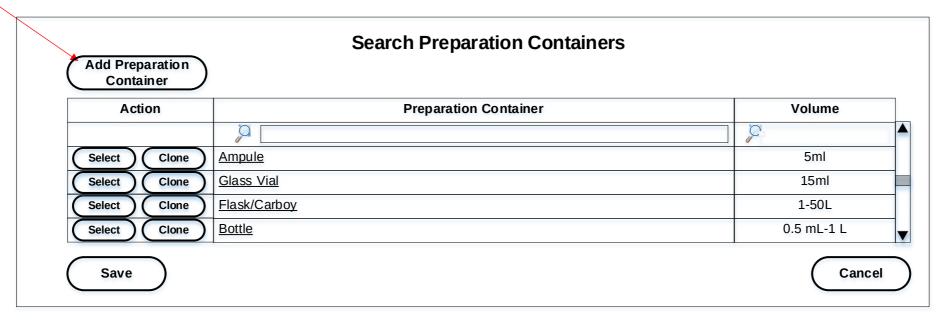


This is an example of the Solid Preparation screen

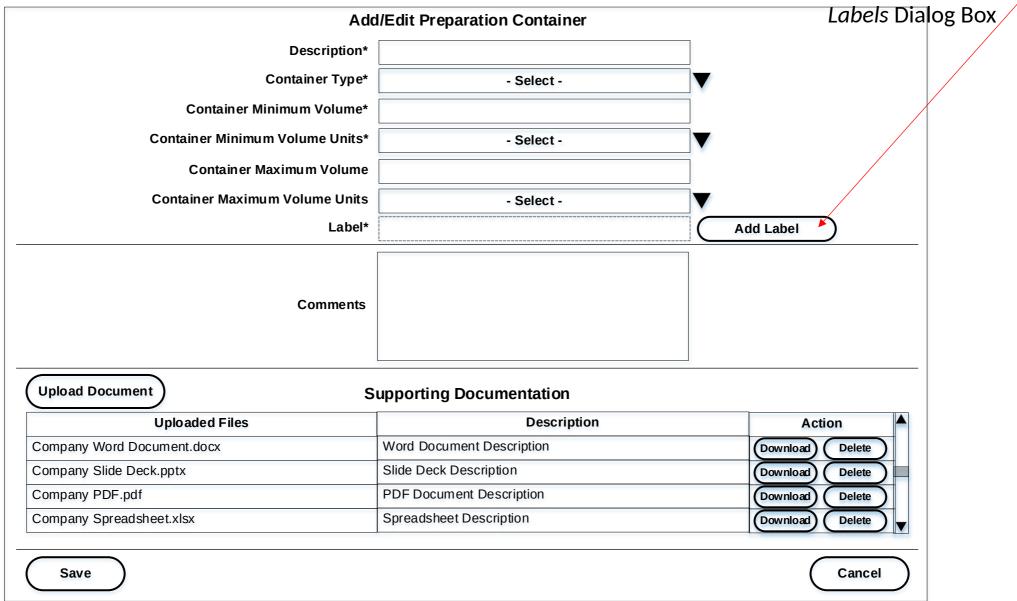


• Displays all of the Preparation Containers associated with this Company

Opens Add Preparation Container Dialog Box

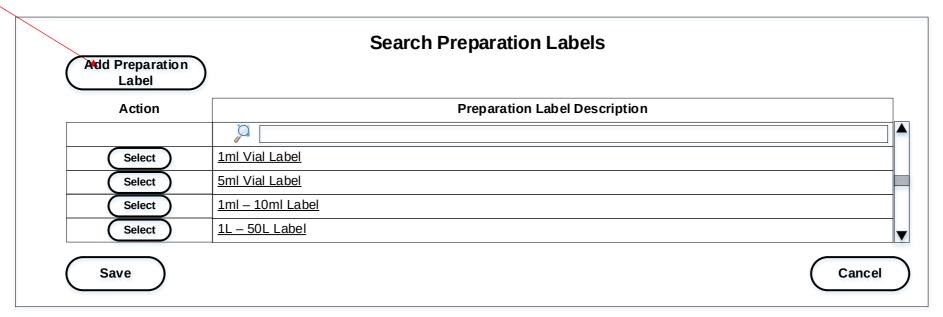


Opens Search Preparation



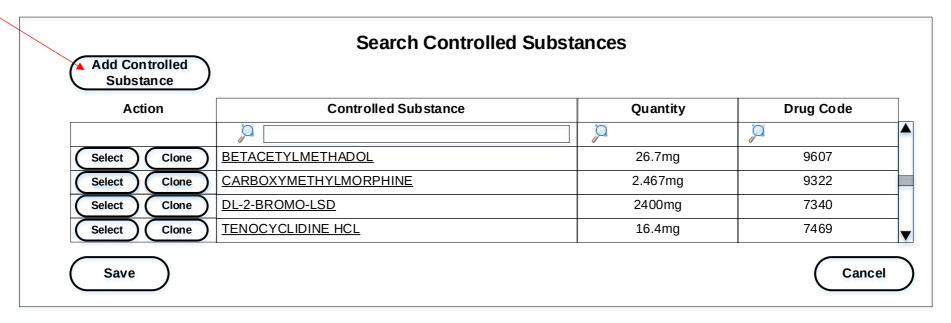
• Displays all of the Preparation Labels associated with this Preparation

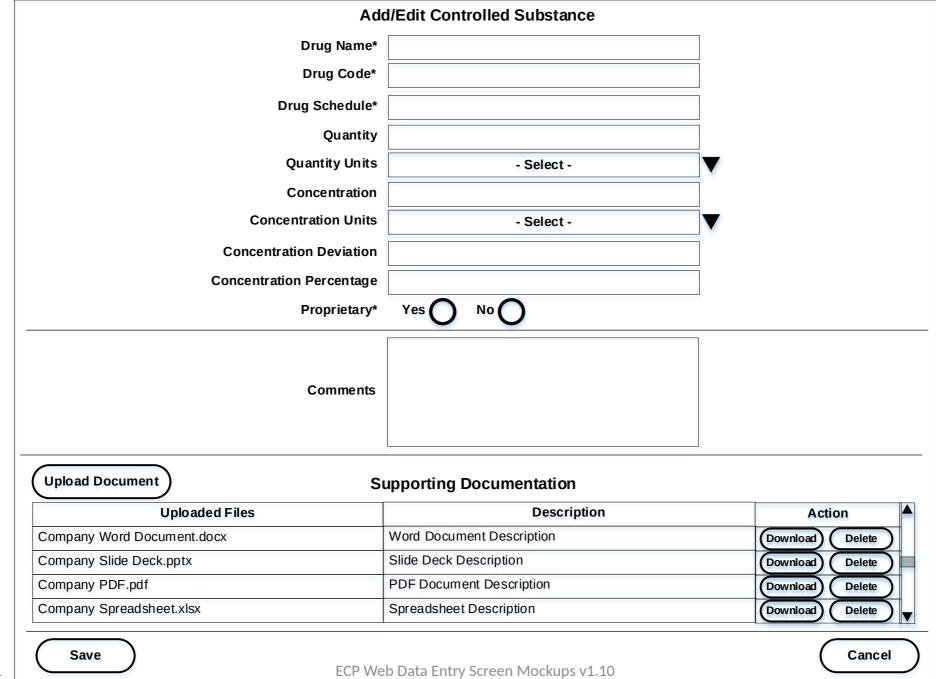
Opens Upload Label
Dialog Box



Displays all of the Controlled Substances associated with this Company

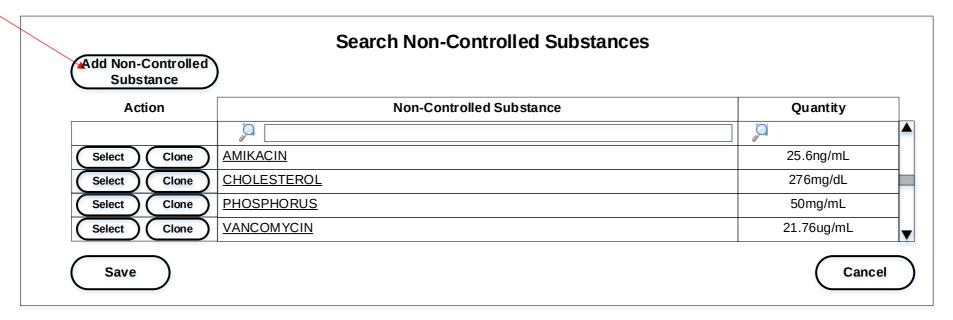
Opens Add Controlled Substance Dialog Box

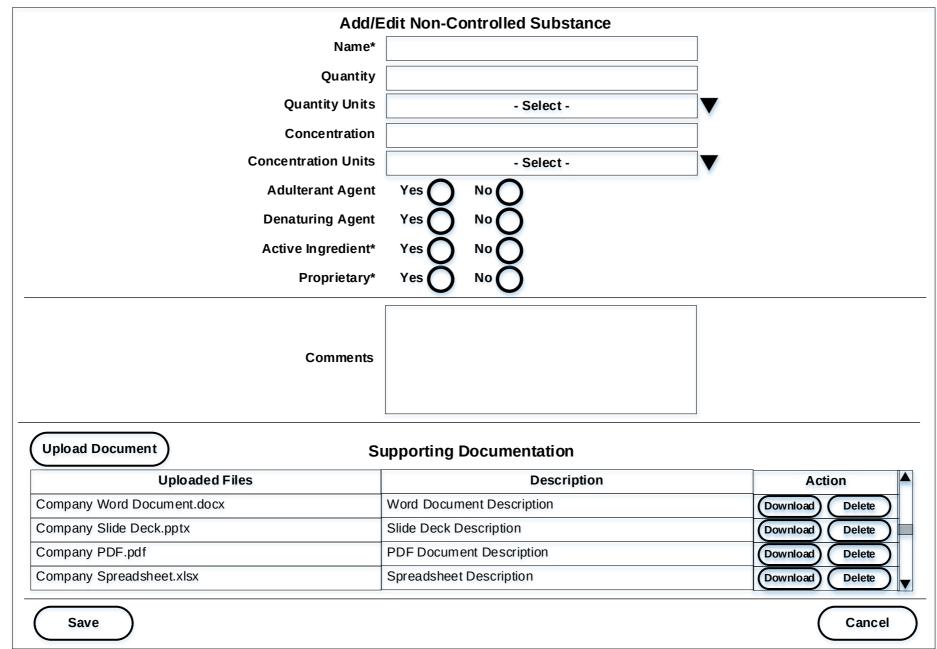




Displays all of the Non-Controlled Substances associated with this Company

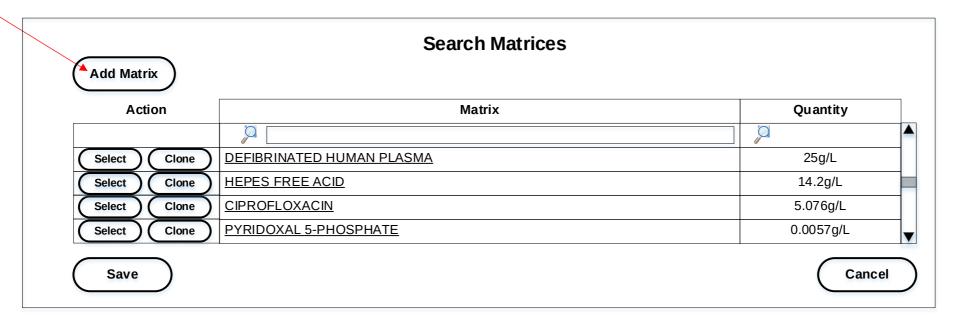
Opens Add Non-Controlled Substance Dialog Box





Displays all of the Matrices associated with this Company

Opens Add Matrix Dialog Box



	Add/Edit Matrix	
Name*		
Volume		
Volume Units	- Select -	\
Proprietary*	Yes No No	
Comments		
Upload Document	upporting Documentation	
Uploaded Files	Description	Action
Company Word Document.docx	Word Document Description	Download Delete
Company Slide Deck.pptx	Slide Deck Description	Download Delete
Company PDF.pdf	PDF Document Description	Download Delete
Company Spreadsheet.xlsx	Spreadsheet Description	Download Delete ▼
Save		Cancel

Exempt Chemical Preparation Application

New Application for Gel Plate Preparation

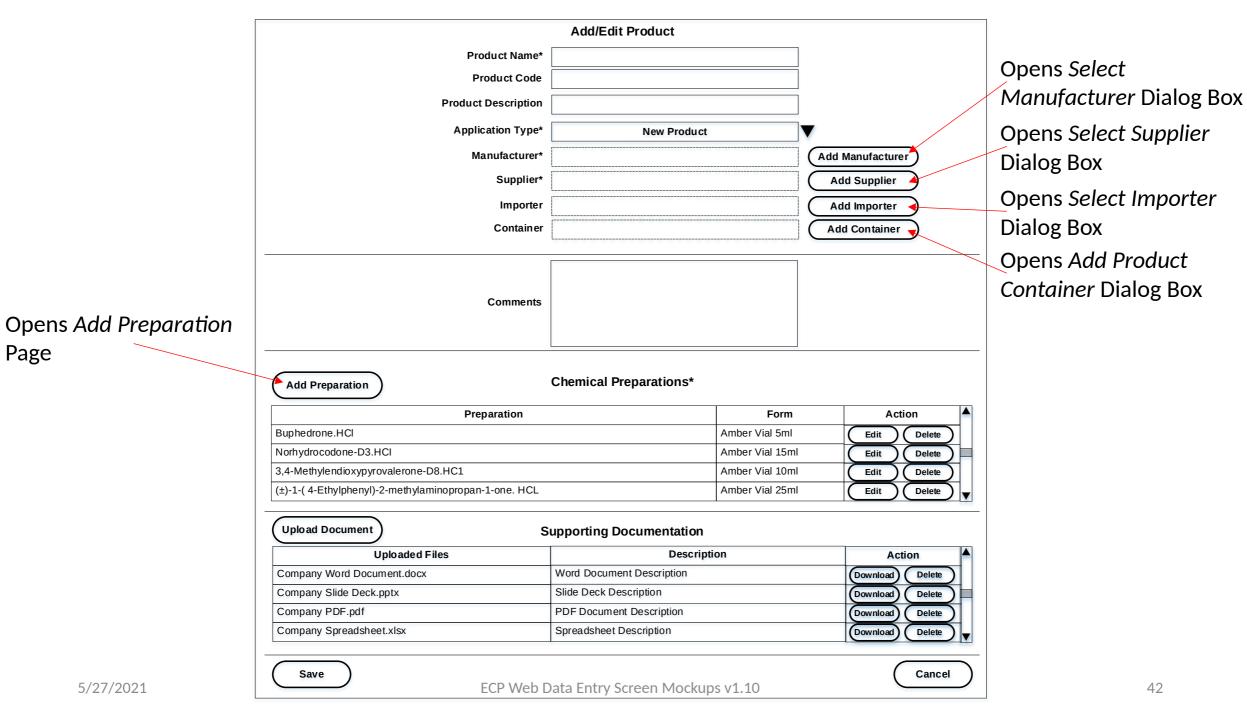
Exempt Chemical Preparations Application DEA Registration Number Company Name **Business Address*** City* State/Province Zip Code/Postal Code Prefilled with Company's Country **Point Of Contact** account information First Name* Middle Name Last Name* Title* Business Email Address* **Business Phone Number*** Application Type* **Exempt Chemical Preparation** Exemption Justification^{*} Add Exempt Candidate Exempt Chemical Preparations* Chemical Preparation Supplier **Product Name** Form **Controlled Substances** Action Hydromorphone Control Product One Amber Vial 5ml Edit Delete Company One Diethylamide Company Two Control Product Two Amber Vial 15ml Methaqualone Delete Company Three Control Product Three Amber Vial 10ml Amphetamine **Upload Document Supporting Documentation Uploaded Files** Description Action Company Word Document.docx Word Document Description Company Slide Deck.pptx Slide Deck Description Company PDF.pdf PDF Document Description Company Spreadsheet.xlsx Spreadsheet Description eSignature* ECP Web Data Entry Screen Mockups v1.10 Submit Cancel

5/27/2021

Dialog Box

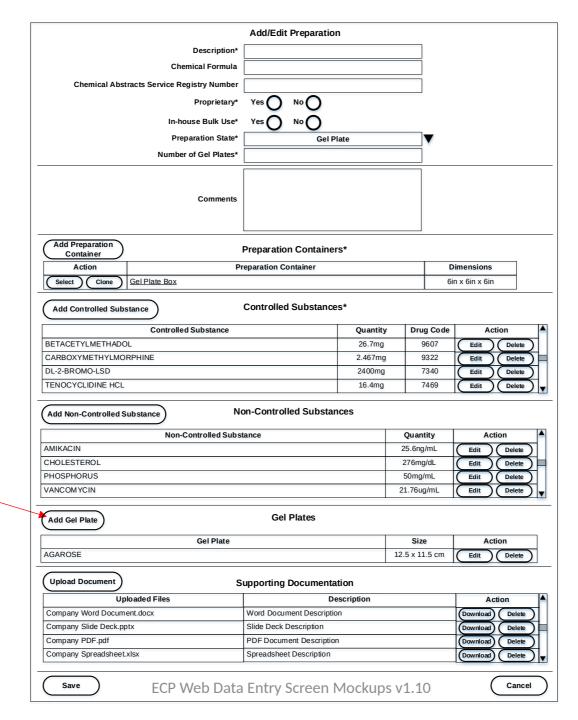
Opens Add Product Page

Opens Upload Document



5/27/2021

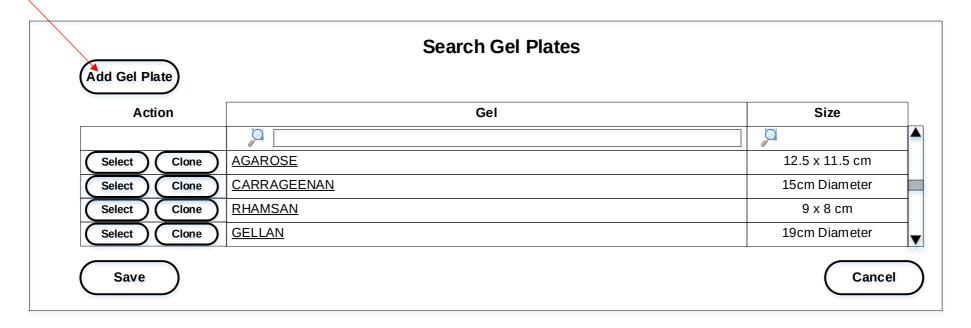
Page

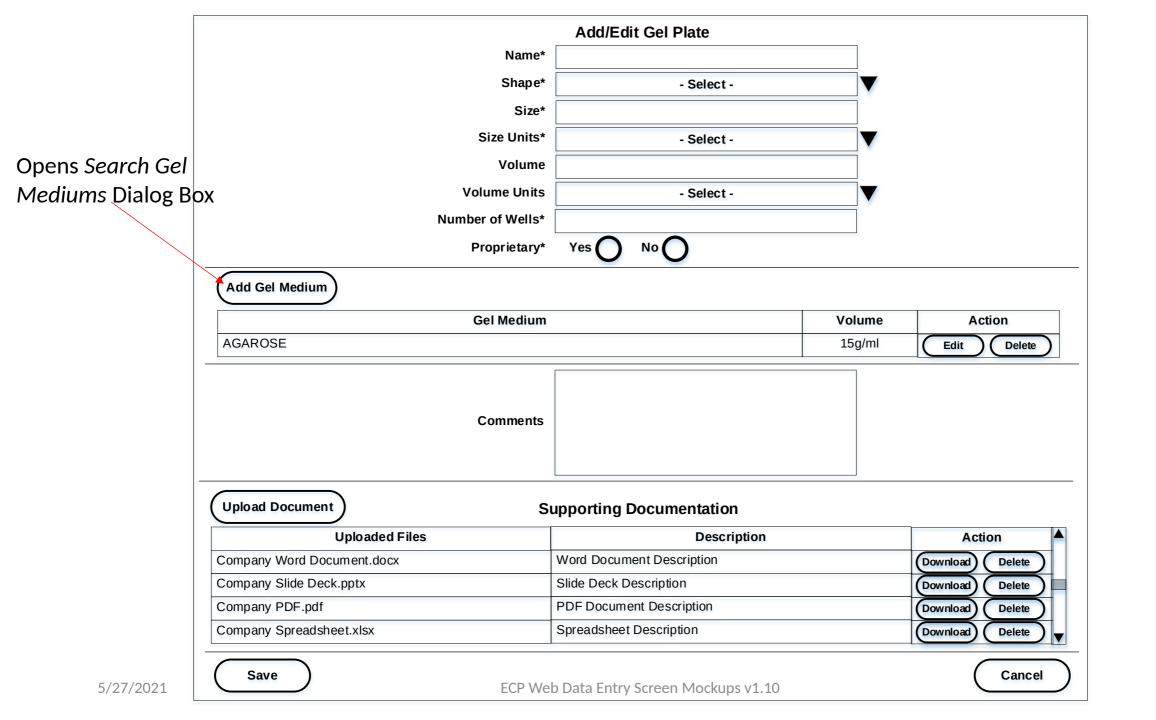


Opens Search Gel Plates
Dialog Box

• Displays all of the Gel Plates associated with this Company

Opens Add Gel Plate
Dialog Box

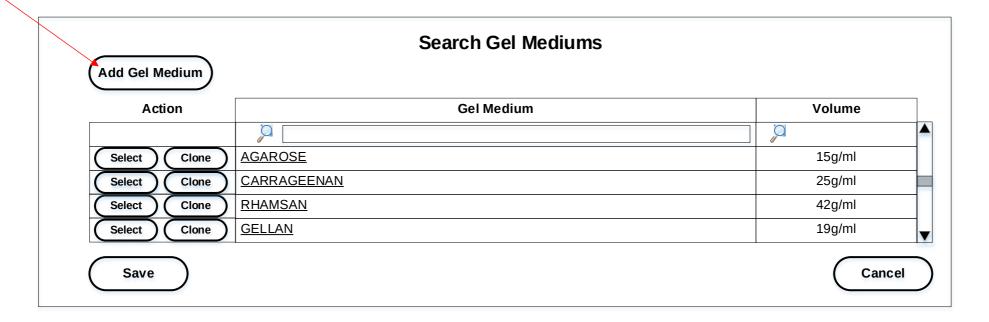


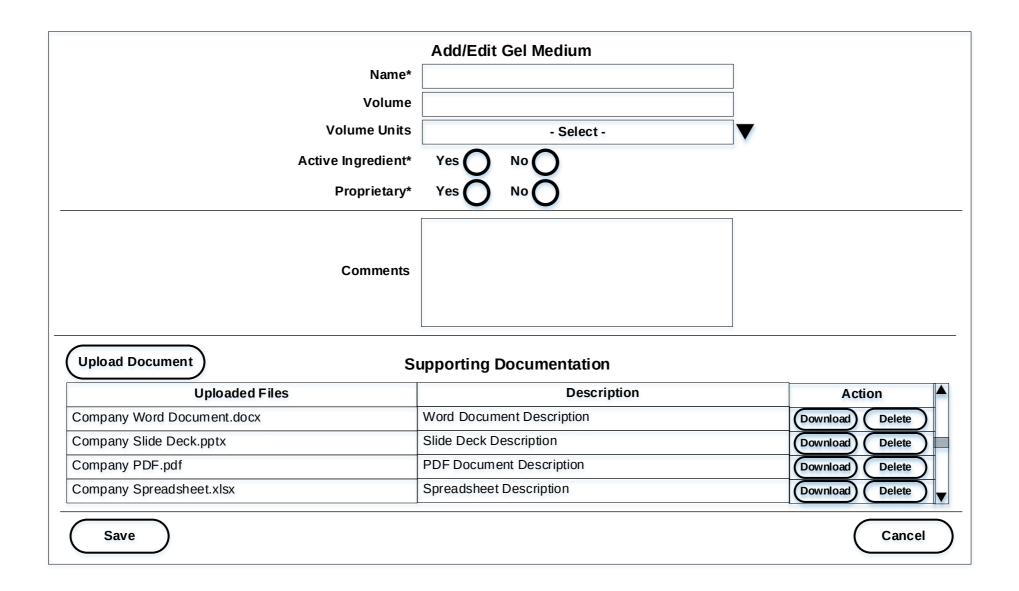


Displays all of the Gel Mediums associated with this Company

Opens Add Gel Medium

Dialog Box



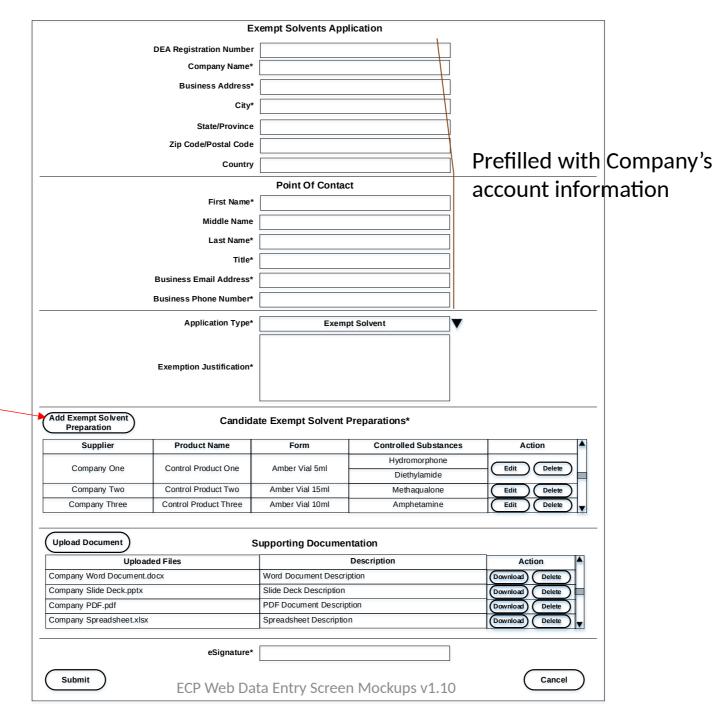


Exempt Chemical Preparation Reapplication

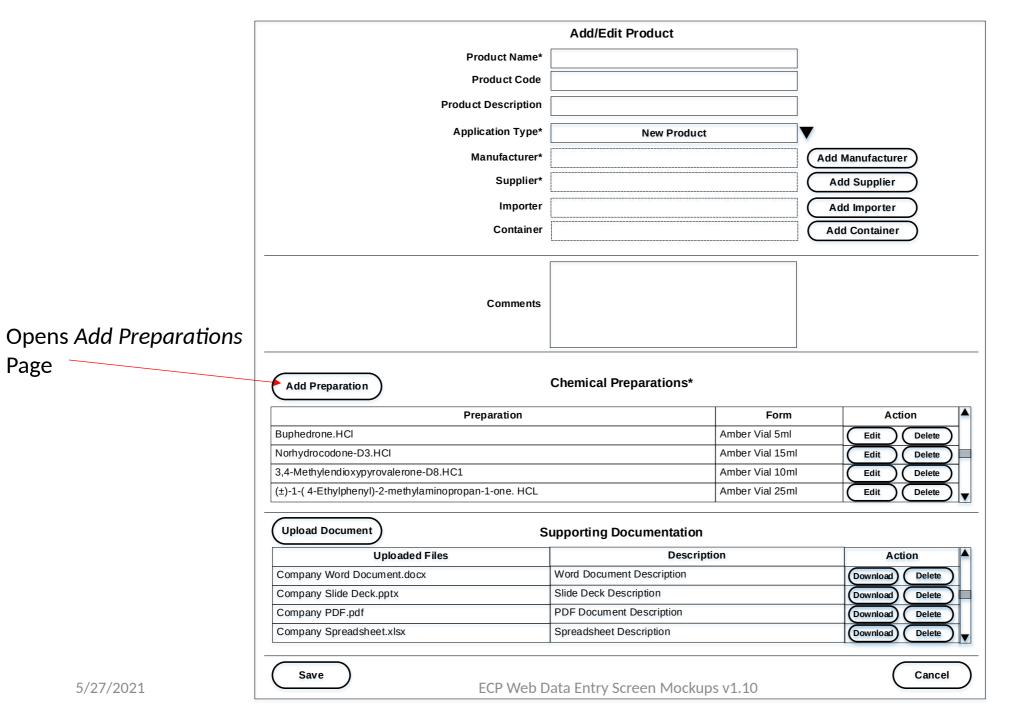
Reapplication for previously approved Exempt Chemical Preparations

DEA Registration Number Company Name*		Exempt	Chemical Preparatio	ns Application		
Business Address* Copy		DEA Registration Number				
State/Province 219 Code-Postal Code Prefilled with Company Point Of Contact First Name Last Name* Last Name* Business Email Address* Business Email Address* Business Phone Number Exemption Justification* Exemption Product Time Justification* Exemption Product Time Justification* Exemption Justification* Exemption Product Time Justification* Exemption Product Time Justification* Exemption Product Time Justification* Exemption Product Time J		Company Name*				
State Province Zip CodelPostal Code Country Point Of Contact First Name* Middle Name Last Name* Business Email Address* Business Phone Number* Application Type* Exempt Chemical Preparations* Exempt Chemical Preparations* Supplier Product Name Exempt Chemical Preparations Action Phydromorphone Company Two Correst Product Two Anaber Vial Smit Company Tree Control Product Name Form Controlled Substances Action Deletylumide Deletylumide Deletylumide Deletylumide Deletylumide Deletylumide Company Two Correst Product Tree Anaber Vial Smit Anaber Vial Smit Deletylumide Del		Business Address*				
Prefilled with Company Country Point Of Contact First Name* Hiddle Name Last Name* Business Email Address* Business Phone Number* Application Type* Exempt Chemical Preparation Reapplication Supplier Product Name Corrawy One Corrard Product One Amber Vial Smit Action		City*				
Point of Contact First Name* Middle Name Last Name* Business Email Address* Business Email Address* Business Phone Number* Exempt Chemical Preparations* Exempt Chemical Preparations* Exempt Chemical Preparations* Exempt Chemical Preparations* Existing Exempt Chemical Preparations* Company One Control Product Name Company One Control Product Two Amber Vial Sml Deliniyumaide Delinyumaide Edit Golden Add Exempt Company Tree Control Product Two Amber Vial Jonel Amber Vial Jonel Amber Vial Jonel Amber Vial Jonel Dienlyumaide Edit Golden Edit Golden Edit Golden Company Tree Control Product Name Form Control Gold Substances Action Hydromorphone Edit Golden Company Tree Control Product Two Amber Vial Jonel Amber Vial Jonel Dienlyumaide Edit Golden Company Tree Control Product Two Amber Vial Jonel Dienlyumaide Edit Golden Edit Golden Company Tree Control Product Two Amber Vial Jonel Dienlyumaide Edit Golden Edit Golden Edit Golden Edit Golden Company Tree Control Product Two Amber Vial Jonel Dienlyumaide Edit Golden Edit Golden Edit Golden Golden Edit Golden Golden Golden Edit Golden Gol		State/Province				
Point Of Contact First Name* Middle Name Last Name* Title* Business Email Address* Business Phone Number* Application Type* Exempt Chemical Preparation Reapplication Exemption Justification* Exemption Justification* Exemption Justification* Existing Exempt Chemical Preparations Reapplication Exemption Justification* Exemption Justification*		Zip Code/Postal Code			5 (11 1	
First Name* Middle Name Last Name* Title* Business Email Address* Business Phone Number Exemption Justification* Exempt Chemical Preparation Reapplication Exemption Justification* Exempt Chemical Preparation Reapplication Exemption Justification* Exempt Chemical Preparations* Company Two Control Product One Amber Vial Sml Delete Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Company Two Control Product Three Amber Vial 15ml Ampherations* Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Chemical Preparation Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Chemical Preparation Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Tompany Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Chemical Preparation Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Tompany Word Control Product Three Amber Vial 15ml Methaquatione Edit Delete Wild Delete Methaquatione Edit Delete Company Two Control Product Three Amber Vial 25ml Methaquatione Edit Delete Company Two Control Product Three Amber Vial 25ml Ampheration Deletylamide Edit Delete Company Two Control Product Three Amber Vial 25ml Ampheration Deletylamide Edit Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Spead Delete Pipe Science Description Countrol Delete Company Spread Delete Science Delete Description Countrol Delete		Country			Prefilled w	ith Company
First Name* Middle Name Last Name* Title* Business Email Address* Business Phone Number Exemption Justification* Exempt Chemical Preparation Reapplication Exemption Justification* Exempt Chemical Preparation Reapplication Exemption Justification* Exempt Chemical Preparations* Company Two Control Product One Amber Vial Sml Delete Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Company Two Control Product Three Amber Vial 15ml Ampherations* Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Chemical Preparation Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Chemical Preparation Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Tompany Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Add Exempt Chemical Preparation Company Two Control Product Three Amber Vial 15ml Methaquatione Edit Delete Tompany Word Control Product Three Amber Vial 15ml Methaquatione Edit Delete Wild Delete Methaquatione Edit Delete Company Two Control Product Three Amber Vial 25ml Methaquatione Edit Delete Company Two Control Product Three Amber Vial 25ml Ampheration Deletylamide Edit Delete Company Two Control Product Three Amber Vial 25ml Ampheration Deletylamide Edit Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Word Control Product Three Amber Vial 25ml Ampheration Delete Company Spead Delete Pipe Science Description Countrol Delete Company Spread Delete Science Delete Description Countrol Delete			Point Of Contac	et	account in	formation
Last Name* Title* Business Email Address* Business Phone Number* Application Type* Exempt Chemical Preparation Reapplication		First Name*			account in	ioiiiatioii
Business Email Address* Business Phone Number* Application Type* Exempt Chemical Preparation Reapplication Exemption Justification* Exempt Chemical Preparations* Exempt Chemical Preparations Action Supplir Company One Control Product Name Company Two Control Product Two Amber Vial 15ml Company Three Control Product Two Amber Vial 15ml Company Three Control Product Two Amber Vial 15ml Company Three Control Product One Amber Vial 15ml Amber Vial 15ml Company Two Control Product One Amber Vial 15ml Dietylamide Edit Detect Detect Dietylamide Edit Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Detect Det		Middle Name				
Business Email Address* Business Phone Number* Application Type* Exempt Chemical Preparation Reapplication Exemption Justification* Existing Exempt Chemical Preparations* Supplier Product Name Form Controlled Substances Action Company One Control Product Two Amber Vial Sml Diethylamide Edit Delete Company Time Control Product Time Amber Vial Isml Methaqualone Edit Delete Company Tree Control Product Time Amber Vial Isml Amphetamine Edit Delete And Exempt Chemical Preparations* Candidate Exempt Chemical Preparations* Candidate Exempt Chemical Preparations* Candidate Exempt Chemical Preparations* Company Time Control Product Time Amber Vial John Diethylamide Edit Delete Company Time Control Product Time Amber Vial John Diethylamide Edit Delete Company Time Control Product Time Amber Vial John Diethylamide Edit Delete Company Time Control Product Time Amber Vial John Diethylamide Edit Delete Company Time Control Product Time Amber Vial John Methaqualone Edit Delete Company Time Control Product Time Amber Vial John Methaqualone Edit Delete Company Time Control Product Time Amber Vial John Methaqualone Edit Delete Company Time Supporting Document Description Uploaded Files Description Document Decemption Delete Company Spreadsheet vials Silde Deck Description Delete Company Spreadsheet vials Silde Deck Description Delete Edit Delete Company PDF pdf PDF Ddf PDF Document Description Delete Company Spreadsheet vials Silde Deck Description Delete Edit Delete Company Delete Description Delete Company Spreadsheet vials Silde Deck Description Delete Edit Delete Company Delete Description Delete Description Delete Delete Delete Delete Delete Description Delete Del		Last Name*				
Application Type* Exempt Chemical Preparations* Add Exempt Chemical Preparations* Existing Exempt Chemical Preparations* Supplier Product Name Company One Control Product Two Company Two Company Two Control Product Two Add Exempt Company Tree Company Tree Control Product Two Amber Vial Sml Methaqualone Edit Delete Add Exempt Chemical Preparations Campany Tree Control Product Two Amber Vial 15ml Amphetamine Edit Delete Add Exempt Chemical Preparations* Candidate Exempt Chemical Preparations* Cangany Two Control Product Three Amber Vial 10ml Diethylamide Company Three Company Three Control Product Two Amber Vial 10ml Diethylamide Company Two Control Product Two Amber Vial 30ml Diethylamide Company Two Control Product Two Amber Vial 30ml Methaqualone Edit Delete Uploaded Files Description Uploaded Files Description Diethylamide Company Spreadsheet.xisx Spreadsheet Xisx Spreadsheet Description Company Spreadsheet Xisx Spreadsheet Description Comp		Title*				
Application Type* Exempt Chemical Preparation Reapplication Existing Exempt Chemical Preparations* Supplier Product Name Form Controlled Substances Action Company One Control Product One Amber Vial 5ml Hydromorphone Edit Delete Company Two Control Product Two Amber Vial 15ml Methaqualone Edit Delete Company Three Control Product Three Amber Vial 10ml Amphetamine Edit Delete Add Exempt Chemical Preparations* Candidate Exempt Chemical Preparations* Company One Control Product One Amber Vial 10ml Hydromorphone Company One Control Product One Amber Vial 10ml Hydromorphone Company Two Control Product One Amber Vial 10ml Hydromorphone Company Two Control Product Two Amber Vial 30ml Methaqualone Edit Delete Company Two Control Product Two Amber Vial 30ml Methaqualone Edit Delete Company Three Control Product Two Amber Vial 30ml Methaqualone Edit Delete Company Three Control Product Two Amber Vial 20ml Amphetamine Edit Delete Upload Document Supporting Documentation Uploaded Files Description Action Uploaded Files Description Document Description Company Spreadsheet Lists eSignature*		Business Email Address*				
Existing Exempt Chemical Preparations* Supplier Product Name Form Controlled Substances Action Company One Control Product One Amber Vial 5ml Diethylamide Company Two Control Product Two Amber Vial 15ml Methagualone Edit Delete Company Three Control Product Three Amber Vial 10ml Amphetamine Edit Delete Company One Control Product Three Amber Vial 10ml Amphetamine Edit Delete Company One Control Product Three Amber Vial 10ml Diethylamide Company One Control Product One Amber Vial 10ml Diethylamide Company Two Control Product One Amber Vial 10ml Diethylamide Company Two Control Product Two Amber Vial 30ml Methagualone Edit Delete Company Two Control Product Two Amber Vial 30ml Methagualone Edit Delete Company Three Control Product Two Amber Vial 30ml Methagualone Edit Delete Company Three Control Product Tree Amber Vial 30ml Methagualone Edit Delete Company Three Control Product Three Amber Vial 30ml Methagualone Edit Delete Company Spreadsheet Jest Description Action Company Spreadsheet Jest Side Deck Description (Download) Delete Company Dept Deck Side Deck Description (Download) Delete Company Spreadsheet Xisx Spreadsheet Description (Download) Delete Company Spreadsheet Xisx Spreadsheet Description (Download) Delete		Business Phone Number*				
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Exempt Solvent Preparation Application

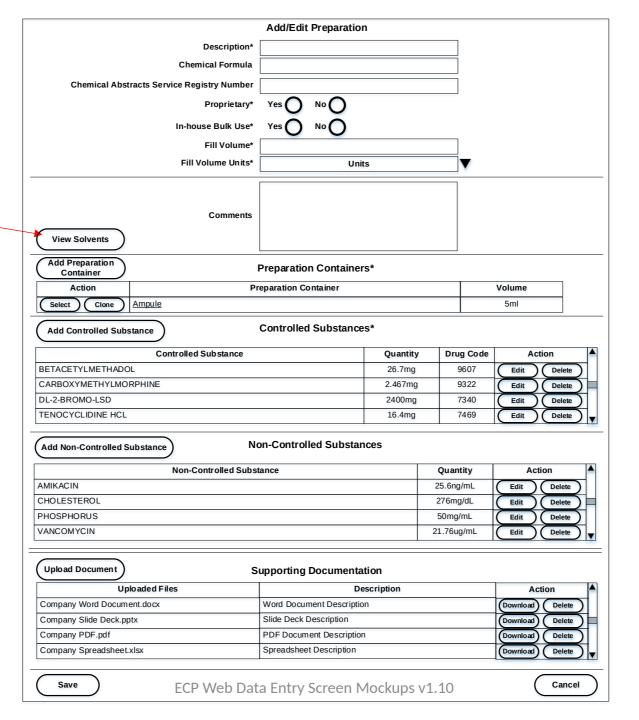


Opens Add Product Page

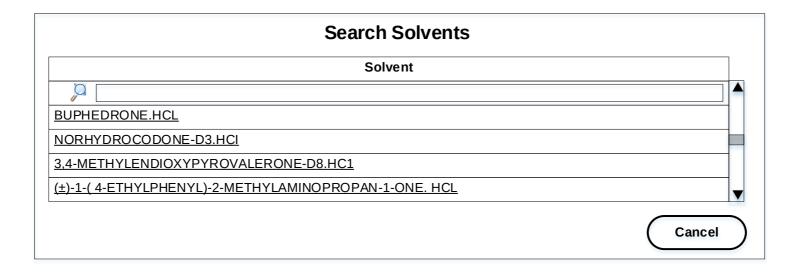


Page

Opens Search Solvents Dialog Box



• Displays all of the Solvents associated with this Company

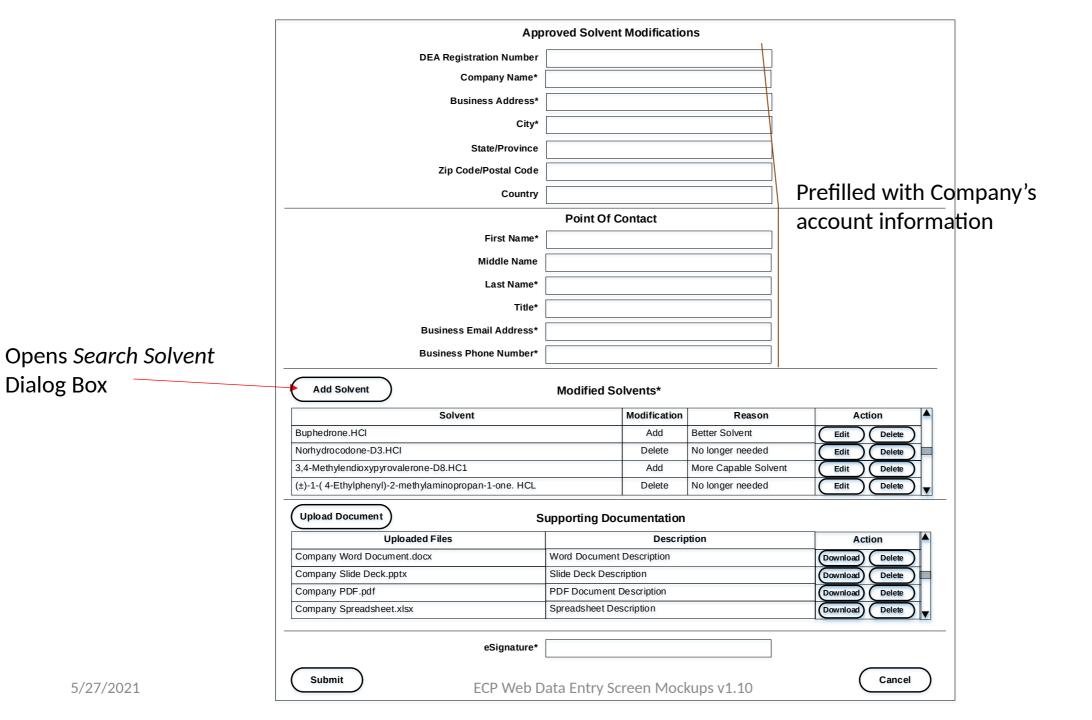


Exempt Solvent Preparation Reapplication

Reapplication for previously approved Exempt Solvent Preparations

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	DEA Registration Number				
	Company Name*		1		
	Business Address*				
	City*				
	State/Province				
	Zip Code/Postal Code			_ 4411 1	
	Country			Prefilled	with Company
		Point Of Contac	t		information
	First Name*			account	Information
	Middle Name				
	Last Name*				
	Title*				
	Business Email Address*				
	Business Phone Number*				
	Application Type*	Exempt Solve	nt Reapplication	•	
	F				
	Exemption Justification*				
Add Exempt Solvent Preparation	Existi	ng Exempt Solvent P	reparations*		_
	Existi Product Name	ng Exempt Solvent P	reparations*	s Action	
Supplier Supplier	Product Name	Form			_
Supplier Company One	Product Name Control Product One	Form Amber Vial 5ml	Controlled Substance: Hydromorphone Diethylamide	S Action Edit Delete	
Supplier Company One Company Two	Product Name Control Product One Control Product Two	Form Amber Vial 5ml Amber Vial 15ml	Controlled Substance: Hydromorphone Diethylamide Methaqualone	Edit Delete	
Supplier Company One	Product Name Control Product One	Form Amber Vial 5ml	Controlled Substance: Hydromorphone Diethylamide	Edit Delete	Y
Supplier Company One Company Two	Product Name Control Product One Control Product Two Control Product Three	Form Amber Vial 5ml Amber Vial 15ml	Controlled Substance: Hydromorphone Diethylamide Methaqualone Amphetamine	Edit Delete	*
Supplier Company One Company Two Company Three Add Exempt Solvent	Product Name Control Product One Control Product Two Control Product Three	Form Amber Vial 5ml Amber Vial 15ml Amber Vial 10ml	Controlled Substance: Hydromorphone Diethylamide Methaqualone Amphetamine	Edit Delete Edit Delete Edit Delete Edit Delete	
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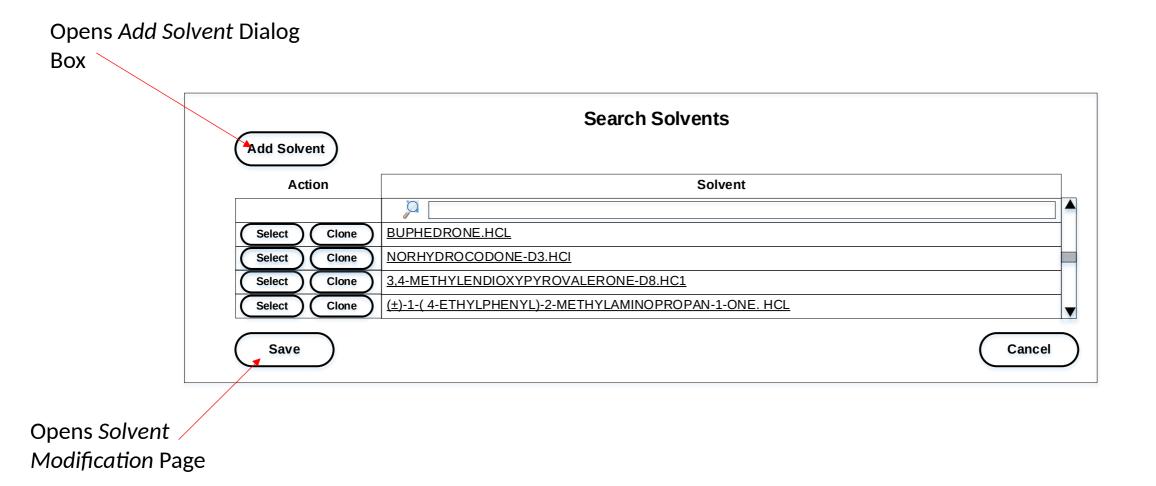
Approved Solvent Modifications



5/27/2021

Dialog Box

Displays all of the Solvents associated with this Company



	d/Edit Solvent Modification	
Name*		
Solvent Modification*	Add Delete	
Reason for Modification*		
Comments		
Upload Document	upporting Documentation	
Uploaded Files	Description	Action
Company Word Document.docx	Word Document Description	(Download) (Delete
Company Slide Deck.pptx	Slide Deck Description	(Download) (Delete
Company PDF.pdf	PDF Document Description	(Download) (Delete
Company Spreadsheet.xlsx	Spreadsheet Description	Download Delete
Save		Cancel