



F.L. MEDICAL s.r.l. Unipersonale

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DECLARATION OF CONFORMITY

MANUFACTURER	F.L. Medical s.r.l. Unipersonale
HEADQUARTERS	TORREGLIA (PD) Via Enrico Mattei, 20
DEVICE	VACUMED® 13x100 mm WITH K3 EDTA x 6 ml OF BLOOD, VIOLET CAP, STERILE
CODE	43116
REFERENCE QUALITY ASSESSMENT	EU Directive 98/79 EEC
DECLARES ON ITS RESPONSIBILITY THAT THE WHOLE PRODUCTION PROCESS FOLLOWS THE STANDARDS REQUIRED BY THE DIRECTIVE. THE TECHNICAL DOCUMENTATION IS LOCATED IN OUR FACILITIES.	
PLACE AND DATE OF CURRENT ISSUE	TORREGLIA (PD) Via Enrico Mattei, 20 Date 03/01/2018
PLACE OF DOCUMENTATION STORAGE	TORREGLIA (PD) Via Enrico Mattei, 20
SIGNATURE	RAQ Alessandro Fiore

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