Programming Validation Sign-off Form



Section 1:

Project and Programming Details:			
ICON Study Number	NA		
Sponsor Study/Protocol:	I3Y-MC-JPCJ		
Programming Development Request Identifier:	NA		
Program Category: [Listing, aCRF, CRT, Patient Profile]	Jreview Report		
Programming Specification Name:	ONC_TU206_RS009_RS018_RS023_V2_Code Development Specifications_29Aug17.docx		
Programming Specification Version Number:	2.0		
Program Name & Location:	ONC_TU206_RS009_RS018_RS023_V2.sas ix1tfsprod01.rf.lilly.com\Central_Instance_Collection1\Lilly_Study_Build\ICON\I3Y_MC_JPCJ\SAS Programs		

Section 2:

Signature of the individual below confirms that programming validation activities have been completed.

Signature and Date of Signature (dd/mmm/yyyy if wet-ink signature)				
	Deenadayalan Murugesan			
	Deenadayalan Murugesan 15 Sep 2017 05:13:051+0000 I approve this document. 95de44e9-ebbd-4dce-810e-3817080e170a			
Print Title: Clinical Data Programming Lead	Print Name: (if wet-ink signature): Deenadaylan Murugesan			

Section 3:

Signature of the Clinical Data Programming Lead below confirms that programming validation activities have been completed.

Signature and Date of Signature (dd/mmm/yyyy if wet-ink signature)

DM020-SOP-F02/Version 4.0/Effective: 13 September 2016

(Ref. DM020-SOP)

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	Joseph Cooney Joseph Cooney 15 Sep 2017 04:17:015+0000 I approve this document. 66916174-eac2-4b11-899a-bf27a56b5cf6			
Print Title: Sr. Clinical Data Programming Lead	Print Name: (if wet ink signature): Joseph Coopey			
Print Title: Sr. Clinical Data Programming Lead Print Name: (if wet-ink signature): Joseph Cooney Section 4: Signature of the DMPM or DM Director below confirms that programming validation activities have been completed and programming validation documentation is complete.				
Signature and Date of Signature (dd/mmm/yyyy if wet-ink signature)				
Print Title:	Print Name: (if wet-ink signature):			
Section 5: The following individuals have participated in the programming validation activities and signature confirms that programming validation has been completed.				
Signature and Date of Signature (dd/mmm/yyyy if wet-ink signature)				
Print Title: Print Company:	Print Name: (if wet-ink signature):			
<u> </u>	<u> </u>			
Signature and Date of Signature (dd/mmm/yyyy if wet-ink signature)				

(Ref. DM020-SOP)

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		A Symbol of Excellence
Print Title:	B. A. W. T.	

Print Name: (if wet-ink signature):

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Print Company: