Annual Pipette Calibration (gravimetric)

Date	_____	**Analyst**	_____	**Balance**	_____
Temp. (C)	_____	**Z-Factor**	_____	**Serial #**	_____

Pipette #	
VOLUME (ml)	**WEIGHT (g)**
MEAN	
CORR. MEAN	
STD DEV	
% CV	
% INACC.	
PASS / FAIL ?	

Pipette #	
VOLUME (ml)	**WEIGHT (g)**
MEAN	
CORR. MEAN	
STD DEV	
% CV	
% INACC.	
PASS / FAIL ?	

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VOLUME (ml)	**WEIGHT (g)**
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STD DEV	
% CV	
% INACC.	
PASS / FAIL ?	

Pipette #	
VOLUME (ml)	**WEIGHT (g)**
MEAN	
CORR. MEAN	
STD DEV	
% CV	
% INACC.	
PASS / FAIL ?	

Corrective Action Due To Failures? _____

_____

Acceptance Criteria
% Inaccuracy must be less than 2.00
No replicate may be greater than 2% from true volume.
%CV must be less than 1.00

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