**Annex 5**

**CLINICAL TRIALS SPONSORED BY THE ANDALUSIAN PUBLIC HEALTH SYSTEM OR NON-PROFIT SCIENTIFIC INSTITUTION**

Mr/Ms      , in their capacity as *Director/Manager of the centre/Medical director of the Centre/Director of the Hospital Pharmacy Service (select the role they occupy)* of the *,* in relation to the trial

“*” (Title)*

*Protocol code:*

*Version:*

*Sponsor:*

*Coordinating Investigator:*

*Principal Investigator of the Centre:*

**STATES**

That given the interest that the aforementioned Study shows, the Centre’s Hospital Pharmacy Service will supply the dose of the medicinal product used in the trial (*: medicinal product under investigation, control or the corresponding)* necessary for the use in the same for its administration to patients included in this centre, both to those who form part of the experimental group as well as those who form part of the control group, in accordance with the provisions of the trial protocol.

And, as a sign of their conformity with the contents of this document, it is signed in      , on      , 20

Signed: Mr/Ms

     (*role*)