PROCEDURES FOR SUBMITTING DIAMONDS FOR GIA MASTER COLOR COMPARISON SET GRADING

- Please send at least two diamonds for creation of a new Master Color Comparison Set.
- Include each diamond's stated weight on a standard parcel paper.
- It is recommended that you send in your existing Master Set for comparison purposes when
- · making any changes to that set.

CRITERIA

The following criteria must be met for Master Color Comparison Stones:

- Unmounted round brilliant cuts (surface must be free of all residue).
- 0.25 carat or more, and we recommend within 0.10 carat of each other.
- Clarity grade not lower than SI2.
- Colorless to yellow only and at least one full color grade apart.
- Thin to thick girdles only (faceted, polished or bruted).

The following criteria make stones <u>unsuitable</u> for a GIA Master Color Comparison Set:

- Any fluorescence to long-wave ultraviolet light for color grades D through J. Weak
- fluorescence is acceptable in color grades K or lower.
- Eye-visible inclusions when viewed through the pavilion.
- Inclusions that noticeably affect the color or transparency.
- · Brownish or grayish color.
- Girdles that are heavily bearded, wavy, have large naturals or large extra facets.
- Crowns or pavilions that are noticeably shallow or deep.

YOUR CAREFUL PRESELECTION OF STONES FOR YOUR MASTER SET WILL HELP ELIMINATE DELAY AND EXTRA COST INVOLVED IN COMPLETING YOUR SET.

FEES

•	First stone accepted as a Master Color Comparison Stone	.\$ 60		
•	Each additional stone accepted as a Master Color Comparison Stone	40		
•	Each stone rejected for any reason designating it unsuitable	. 15		
•	Verification of a Master Color Comparison Set(per stone)	. 20		
•	Each nonmatching stone not verified	15		
•	Preparing new labeled stone papers	20		

A \$1.00 handling fee per stone will also be charged, as well as return postage fees.

Clients requesting the GIA color grading system will receive a GIA Diamond Master Color Comparison Set Report listing all acceptable stones in their proper order. In addition, new parcel papers and labels will be furnished.

SHIPMENT

We request that all packages be sent by registered, insured mail (in the USA) or armored courier services. Additional private insurance coverage may be necessary. All packages are returned the same way as sent unless a letter is submitted specifically requesting otherwise.

YOU MUST HAVE A CURRENT CLIENT AGREEMENT FORM ON FILE WITH THE GIA LAB WHEN SUBMITTING STONES. IF YOU HAVE NOT CONDUCTED BUSINESS WITH THE GIA LAB IN THIS CALENDAR YEAR, PLEASE SUBMIT A COMPLETED CLIENT AGREEMENT FORM (ENCLOSED) WITH YOUR STONES TO AVOID UNNECESSARY DELAY.

Please send stones, client agreement form (if not already on file), and completed Master Color Comparison Set grading request form to:

GIA LAB 5355 Armada Drive Suite 200 Carlsbad, CA 92008

GIA MASTER COLOR COMPARISON SET GRADING REQUEST FORM

INSTRUCTIONS FOR GIA LAB (Please the following appropriate boxes):

	I have an <u>existing</u> Master Color Comparison Set (set number, previously submitted under the name:), and want				
	to :	add these stones. eliminate split grade masters and a replace stones. List color grade and	dd single grade masters. I measurements of stones being replaced:		
			ades. new owner. The name and address of the		
	Split GIA color grades are acceptable to me (e.g., G-H, I-J, etc.). I request single GIA color grades only (e.g., F, H, M, etc.). I request the following grades only:				
I ☐ do ☐ do not want each stone to be laser inscribed for the additional standard fee. ⇒ Please laser inscribe: ☐ Master Color Comparison Set number, ☐ other: ⇒ We recommend that laser inscriptions on master stones be of minimal length.					
FOR SUPPLIERS ONLY: I am supplying a master set for the following company: Name: Address:					
		Phone number: ()	- ext.		
GIA LAB maintains a record of every Master Color Comparison Set and owner. Sets will be filed under the name of the company being supplied, not the name of the supplier.					
Your business name:Business address:			Contact Person:		
Phone	#: () - ext.	Client number: Total insurance value:		
Signati	ure:		Date:		
Printed Name:					

RETAIN A COPY OF THIS FORM FOR YOUR RECORDS