



SAMPLE SUBMISSION FORM

CLIENT INFORMATION

Company Name:	
Contact Name:	
Address:	
City/State/Zip code:	
Phone:	Cell:
Email:*	

* Please note all reports are sent via email unless requested otherwise

Authorizing Signature: _____ Date: _____

LAB INFORMATION

(LAB USE ONLY)

Submission Date:	Time:
Received by:	
Courier:	
Receipt Temp:	Thermometer:
Storage Location:	
Payment Status: ☐ Paid ☐ Invoice ☐ Invoice (credit card 3% fee)	

							(LAB USE ONLY)	
SAMPLE #	SAMPLE DESCRIPTION	NET WT.	LOT #/CODE	PRODUCTION DATE/TIME	EXPIRY DATE	TEST CODE(S)	REPORT #	SAMPLE ID
1								
2								
3								

USE BELOW TEST CODE NUMBERS

MICROBIOLOGY

- | | |
|-----------------------------------|---|
| 1. Aerobic (Standard) Plate Count | 14. Listeria species |
| 2. Aciduric Plate Count | 15. Listeria monocytogenes |
| 3. Anaerobic Plate Count | 16. Pseudomonas |
| 4. Bacillus cereus | 17. Psychrotrophs |
| 5. Campylobacter | 18. Residual Bacteria Count |
| 6. Clostridium Perfringens | 19. Salmonella species |
| 6a. Clostridium Botulinum | 20. Staphylococcus |
| 7. Coliform | 21. Shiga Toxin Producing E.coli (STEC) |
| 8. E. coli | 22. Thermophiles |
| 9. E. coli O157:H7 | 23. Vibrio |
| 10. Enterobacteriaceae | 24. Water Potability |
| 11. Heterotrophic Plate Count | 25. Yeast |
| 12. Heteroferment. Lactobacillus | 26. Mold |
| 13. Lactic Acid Bacteria | |

CHEMISTRY

- | | |
|-------------------|---------------------|
| 27. Alcohol (ABV) | 40. Iron |
| 28. Arsenic | 41. Lead |
| 29. Ascorbic Acid | 42. Magnesium |
| 30. Brix | 43. Mercury (Total) |
| 31. Caffeine | 44. Minerals |
| 32. Calcium | 45. Nitrites |
| 33. CBD | 46. Nitrates |
| 34. Chlorine | 47. Oil & Grease |
| 35. Chloride | 48. Oxygen |
| 36. Conductivity | 49. Peroxide Value |
| 37. Copper | 50. Phosphate |
| 38. Heavy Metals | 51. Potassium |
| 39. Histamine | 52. pH |

ALLERGEN

- | | |
|-------------------------|---------------------|
| 53. Salt | 66. Aflatoxin |
| 54. Sodium | 67. Crustacea |
| 55. Total Solids | 68. Dairy |
| 56. Sugar Profile | 69. Egg |
| 57. Sulfates | 70. Fish |
| 58. Sulfites | 71. Gluten |
| 59. Titratable Acidity | 72. Mustard |
| 60. Turbidity | 73. Peanuts |
| 61. TVBN | 74. Soy |
| 62. Vitamins | 75. Multi Tree Nuts |
| 63. Water Activity (aW) | 76. Sesame |
| 64. Water Phase Salt | |
| 65. Zinc | |

PROXIMATE

- | | |
|-------------------|------------------------|
| 77. Ash | 82. Fatty Acid Profile |
| 78. Calories | 83. Free Fatty Acids |
| 79. Carbohydrates | 84. Fiber (Dietary) |
| 80. Cholesterol | 85. Fiber (Crude) |
| 81. Fat | 86. Moisture |
| | 87. Protein |

OTHER

- | | |
|-------------------------------------|--------------------------------------|
| 88. Shelf Life Evaluation | 91. Lab-Based Nutrition Evaluation |
| 89. Accelerated Shelf Life | 92. Database Nutritional Evaluation |
| 90. Shelf Life Extension Consulting | 93. Ingredients Statement Consulting |
| | 94. Organoleptic Analysis |
| | 95. Consulting Services |
| | 96. Foreign Matter ID |

☐ Other Service (Specify): _____For a full list of our services, please visit our website: www.advancedfoodlabs.comResult Turnaround: ☐ Standard ☐ RUSH (50% Surcharge) ☐ RUSH PRIORITY (100% Surcharge)☐ AFL - TAT: _____

Notes/Comments/Special Requirements:



2 Williams Street • Chelsea, MA 02150 • www.advancedfoodlabs.com

Tel: 617-269-6424 • Fax: 617-268-1635

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SAMPLE #	SAMPLE DESCRIPTION	NET WT.	LOT #/CODE	PRODUCTION DATE/TIME	EXPIRY DATE	TEST CODE(S)	REPORT #	SAMPLE ID
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								