



SAMPLE SUBMISSION FORM

DATE

P.O. NUMBER (if required)

21 Alpha Road, Suite D, Chelmsford, MA 01824-4172 USA • (978) 256-1220

REPORTING INFORMATION—SEND RESULTS TO

COMPANY _____

ADDRESS _____

CITY _____ STATE/PROVINCE _____

COUNTRY _____ POSTAL CODE _____

FIRST NAME _____ EMAIL _____

LAST NAME _____ EMAIL _____

PHONE/EXT _____ EMAIL _____

BILLING INFORMATION (IF DIFFERENT)

New clients please call to set up account.

CONTACT _____

COMPANY _____

ADDRESS _____

CITY/STATE _____

POSTAL CODE/COUNTRY _____

PHONE/EXT _____ FAX _____

EMAIL _____

KFL ID#	SAMPLE DESCRIPTION	SAMPLE ID (LOT#, BATCH#, ETC.)	COUNTRY OF ORIGIN

ANALYSIS REQUIRED	<input type="checkbox"/> RUSH SERVICE (PRIORITY SURCHARGE APPLIES)	EXPECTED LEVELS
<input type="checkbox"/> Fruit Juice Authenticity Analysis		
<input type="checkbox"/> FDA/NLEA Nutritional Label Package — indicate serving size <input type="text"/>		
<input type="checkbox"/> Proximate Analysis (moisture, ash, fat, protein, calories, calories from fat, carbohydrates)		
<input type="checkbox"/> Other Nutritional Analysis (indicate right)		
<input type="checkbox"/> Microbiological Analysis (indicate right)		
<input type="checkbox"/> Pesticide & Residue Analysis (indicate right)		
<input type="checkbox"/> Honey Authenticity Analysis		
<input type="checkbox"/> Vanilla Analysis (indicate right)		
<input type="checkbox"/> Other Analysis (indicate right)		

BACKGROUND INFORMATION • SPECIAL INSTRUCTIONS

KFL USE ONLY

Temperature

Warm

Cold

Frozen

Condition

Good

Bad

Spoiled

Storage

Shelf

Refrigerator

Freezer

Send form with samples to:
 Sample Receiving
 Krueger Food Laboratories
 21 Alpha Road, Suite D
 Chelmsford, MA 01824-4172 USA

For inquiries:
 (978) 256-1220 t
 (978) 256-1222 f
 sgeorge@kfl.com
 www.kfl.com

Send Brochure:
 Service & Fee
 Schedules (PDF)