11040A Lin-Valle Drive, St. Louis, MO 63123 1-877-435-5227
www.foodtestinglab.com www.shelflifestudy.com www.emsl.com

EMSL ANALYTICAL, Inc. CHAIN OF CUSTODY NUTRITIONAL DATABASE ANALYSIS

Third Party Billing requires written authorization from third party

Report to: _____
Company: _____
Street: _____
Box #: _____
City: _____
State: _____ **ZIP** _____

Project Name/Number: _____
Telephone #: _____
Email address _____

EMSL – Bill to:
Name: _____
Street: _____
Box #: _____
City: _____
State: _____ **ZIP** _____

Fax Results to:
Name: _____
Fax #: _____
Purchase Order #: _____

Formula Name: _____

This Formula makes _____ **Servings** **Serving Size** _____ **Units** _____

Allergens to Declare (check all that apply):
☐ Egg ☐ Fish ☐ Milk ☐ Peanut ☐ Shellfish ☐ Soy ☐ Tree Nuts ☐ Wheat

Ingredient*	Description*	Manufacturer*	Amount	Unit

Be as specific as possible, attach manufacturer's nutrition information and ingredient statement if available.

Processing Method: _____ **% Moisture (if available)** _____

Uncooked / pre-baked weight _____ **Cooked / baked weight** _____

Requested Turn Around Time (check one): ☐ 6-10 days (standard) ☐ 5 days ☐ 3 days ☐ 48 hour** ☐ 24 hour**
***RUSH Analysis subject to laboratory schedule and availability. Contact laboratory prior to submittal for availability options.**

Unless otherwise stated, default values will be used for all ingredients.
Unique / specialty ingredients may incur an ingredient surcharge. Contact the laboratory with any questions.

Relinquished: _____ Date: _____ Time: _____
Received: _____ Date: _____ Time: _____
Relinquished: _____ Date: _____ Time: _____
Received: _____ Date: _____ Time: _____

Send Email Print Form