

Sample Submission Form - Fats & Oils

Phone: 888-229-2011 | Email: testing@foodchainid.com

| Testing Client (Company Name on Analysis Report) | | | Company to Invoice | | | |
|--|-------------------|-------------------|--------------------|------------------|------------------|--|
| Company : | Contact Name : | Contact Name : | Company : | Contact Name : | Contact Name : | |
| | Email : | Email : | Address : | Email : | Email : | |
| Address : | Phone Number: | Phone Number: | | Phone Number: | Phone Number: | |
| | Receive Results : | Receive Results : | Purchase Order #: | Receive Invoice: | Receive Invoice: | |

| | Client's Sample ID | Sample Description | Use the dropdowns to specify the test(s) requested | | | | | Requested Turn Around Time |
|---|--------------------|--------------------|--|--|--|--|--|----------------------------------|
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |

Additional Information:

Analytical Services are performed by FoodChain ID Testing, LLC in Chantilly, VA. All analytical services are subject to our Standard Terms and Conditions.

Label your physical sample with your sample ID. Double bag your samples or place them in a leak-proof container. Mail them to: FoodChain ID Testing, 4150 Lafayette Center Drive, Suite 600, Chantilly, VA 20151

| By signing below you agree to pay the applicable FoodChain ID fees for testing, and you agree to the Standard Terms and Conditions on the FoodChain ID's website. | | | | | |
|---|-------|------|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| Authorized Signature | Print | Date | | | |

4150 Lafayette Center Drive, Suite 600, Chantilly, VA 20151 5703-222-8700