Food & Product Sample Submission Form

AgSource Laboratories
A Subsidiary of Cooperative Resources International

3700 Downwind Drive
Marshfield, WI 54449
Phone: 715.898.1402
Fax: 715.898.1408

Customer Name: *Contact, Company, Address, Phone, Email*	Report to: *Contact, Company, Address*	Bill to: *Contact, Company, Address, Phone*
Report Method: ☐ Email: ☐ Mail: ☐ Fax:	Email to: CC on Email:	

Account #:

	Sample Description	Collection Date	Microbiological													Analytical								Pathogen				Specialty Testing									
			Aerobic Plate Count (SPC)	Anaerobic Plate Count	Bacillus Cereus Count	Coliform Count, Total	E. coli/ Coliform Count	Enterobacteriaceae Count	Heterofermentative Lactobacillus	Staphylococcus aureus	Thermophilic Bacteria	Total Lactic Acid Bacteria	Yeast and Mold Rapid Count	Clostridium species	Clostridium Sulfite Reducing	Acidity, Titratable	Ash	Babcock/Mojonnier Fat	% Moisture or % Solids	pH	% Protein, Kjeldahl	% Salt	Scorched Particles	E.coli O157 H:7	* Salmonella *	* Listeria *	E. Sakazakii (Cronobacter)	Vitamin A	Vitamin C	Vitamin D	Nitrate and Nitrite	Nitrate only	Lactose	Crude Fiber	Sugar Profile	Other
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** NOTE * Please indicate the sample size:*

Salmonella: ☐ 25g ☐ 125g ☐ 375g

Listeria: ☐ 25g ☐ 125g

Special Instructions:

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