ANALYSIS REQUEST FORM

Send Report to the Attention of:_____ Phone number:_____ Date:_____ PO#_____

Company Name:_____ Address: _____

Email(s):_____

Bill Address *(if different than above)*:_____

Special Instructions

Analysis Requested (Please check appropriate boxes)

Sample Name/Description	Mycotoxins												Food Allergens														Others			Meat Speciation									
																														Raw Meat					Cooked Meat			
	Aflatoxin		Vomitoxin (DON)		Fumonisin		HT-2/T-2 Toxin		Ochratoxin		Zearalenone		Almond	Egg	Gliadin (R5)	Hazelnut	Soy	Total Milk	Casein	Mustard	Peanut	Crustacea	Sesame	Walnut	Coconut	Ruminant-Feed/Bone Meal	Histamine	CP-4	Horse	Cow	Pig	Sheep	Poultry	Beef	Pork	Poultry	Sheep
	ELISA	HPLC*	ELISA	HPLC*	ELISA	LCMS*	ELISA	LCMS*	ELISA	HPLC*	ELISA	HPLC*																										
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**HPLC/LCMS testing has a 5 day turnaround time.*

Please make additional copies of this form as needed. Submit ~100 g of sample for each test.

☐ **Rush Order:** Results at end of one business day (additional cost). All rush analyses require prior notification to the laboratory. Please call 800.234.5333 x 4481 to alert that they are being shipped.

☐ **Dilute Samples:** A 1.5x surcharge will be charged if dilutions are performed. Allergens will be diluted up to 5,000 ppm. Results will be expressed as > Limit of Quantitation for each kit unless the Dilute Samples box is checked.

☐ **Phone results** ☐ **Email results**

Mail to:

Attention:
Technical Service–Lab Services
301 N. Hosmer, Lansing, MI 48912

FAX: (517) 367-0514

NEOGEN