|  |
| --- |
| 1-Client Job no#  |
| 2-Company Name: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3-Adress |
| 4-E-mail: |
| Phone |
| 5-Invoice (contact person) |
|  **SAMPLE IDENTIFICATION** |  **Harvest Date**  | Location | Sample type | **PLEASE CHECK ANALYSIS REQUESTED**  |
| 1-  |   |   |   |   |   |   |   |   |  |   |  |  |  |  |  |  |  |  |  |  |
| 2-  |   |   |  |  |  |   |  |   |   |   |  |  |  |  |  |  |  |  |  |  |
| 3- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15- |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Turn around required Rush\_\_\_ Standard \_\_\_Holiday\_\_\_\_\_\_\_ \*Double Rates may apply for Rush  Analysis  |   Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Laboratory Use Only**Rec’d by:\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_ Temp:\_\_\_\_\_\_\_\_ Storage:\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_ |  **Laboratory Use Only** Rec’d by:\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_\_\_\_ Temp:\_\_\_\_\_\_\_\_Weight \_\_\_\_\_\_\_ Storage:\_\_\_\_\_\_\_  Date:\_\_\_\_\_\_\_\_\_ |

 Capella Innovation Sample Submission Form Analysis requested -Allergens

 **WARRANTY AND LIMITS OF LIABILITY**: Our warranty is limited to the accuracy of samples as received. We assume no responsibility for the purpose for which the client uses the test results, nor liability for any otherwarranties expressed or implied, including warranties of fitness for particular purpose or merchantability made by the client. These terms and conditions shall supersede any conflicting terms and conditions stated on any purchase order, or other order of work submitted by the client. **NOTE:** Signature is required for analysis to commence. Please contact the lab for any additional information not provided.

 **CONFIDENTIALITY**: All work will be performed in confidence. Results are only released to the client or the client's designated agent.

*Analysis* are an important tool for companies both large and small to ensure quality and maintain their competitive edge

List *of Analysis Price per sample*

|  |  |  |  |
| --- | --- | --- | --- |
| Peanut Allergen | ALL1001 | Brazil Nut Allergen | ALL1013 |
| Almond Allergen | ALL1002 | Cashew Allergen | ALL1014 |
| Egg Allergen | ALL1003 | Pistachio Allergen | ALL1015 |
| Hazelnut Allergen | ALL1004 | Macadamia Allergen | ALL1016 |
| Total Milk Allergen | ALL1005 | Crustacea Allergen | ALL1017 |
| Soy Flour Allergen | ALL1006 |  |  |
| Gliadin (Gluten) Allergen | ALL1007 |  |  |
| Walnut Allergen | ALL1008 |  |  |
| Shellfish Allergen | ALL1009 |  |  |
| Soy Allergen | ALL1010 |  |  |
| Lupine Allergen | ALL1011 |  |  |
| Mustard Allergen | ALL1012 |  |  |
| Sesame Allergen | ALL1013 |  |  |

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