

## Mill Identification

Name:	Code: <small>For quality control only</small>
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## Sales Representative

Name:	User
	Code:

## Producer Identification

Name:	CRM Code:
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## Sampling Date

## Representative Email and Phone Number

Check this box for new customer:

Temperature upon receipt of the sample: \_\_\_\_\_ °C

**I want my sample to be analyzed even if the receiving temperature is non-compliant:** \_\_\_\_\_ Initials

**Laboratory use only**

## Product Description

## Product Code

Sponge	Dry food sample
Swab	Wet food sample
Water or other liquid	Other: _____

## Requested Analyses

<i>Salmonella spp</i> (MFLP-49)	<b>If detected</b> →	Government serotyping ( <i>Delay : 6 to 8 weeks</i> )
		Fast serotyping (\$\$) ( <i>Delay : 7 open days</i> )
Yeast (MFHPB-32)		
Mold (MFHPB-32)		
Total Count (MFHPB-33)		
Total Coliforms (MFHPB-35)		
<i>Enterobacteria ceae</i> (MFLP-09)		
<i>E.Coli</i> (MFHPB-34)		
Other: _____		

## Additional Information