


Instructions: Complete this interactive electronic document in Adobe Acrobat Approval® and then click the "Send" button at the bottom of the page to email the document to Warren Analytical Laboratory.

www.warrenlab.com		NUTRITIONAL LABELING ANALYSIS REQUEST FORM		info@warrenlab.com	
 Warren Analytical Laboratory		Warren Analytical Laboratory 650 "O" Street Greeley, CO 80631		970-475-0252 FAX 970-351-6648 800-945-6669	
Lab Use Only: Work Order #		Client I.D.#		Date:	
1 Reporting Information			2 Billing Information		
Company:			Company:		
Contact Person:			Contact Person:		
Address:			Address:		
Phone:			P.O.#		
Fax:			Account #		
Email:					
Submitted by:					
3 Results Reporting (check box)			4 Turn Around Time (check box)		
Phone Results:	Yes	No	Standard		
Fax Results: (\$1.00 fee per fax connection)	Yes	No	Priority (100% Surcharge. Please Call.)		
Email Results:	Yes	No			
5 Sample Description:					
6 Serving Information:					
Household Measurement (e.g. cup, slice, piece) -					
Equivalent Metric Quantity (g, oz, etc.) -					
Servings Per Container -					
7 Special Instructions:					
8					
Required Analysis for Nutritional Labeling	Check Box	Expected Range	Optional Analysis for Nutritional Labeling	Check Box	Expected Range
Total Fat			Thiamin (B ₁)		
Moisture			Riboflavin (B ₂)		
Protein			Potassium		
Ash			Complex Carbohydrates		
Carbohydrates			Sugar Alcohol		
Sugars			Total Unsaturated Fat		
Calories			Monounsaturated Fat		
Calcium			Polyunsaturated Fat		
Iron					
Sodium					
Vitamin A					
Vitamin C					
Saturated Fat					
Cholesterol					
Total Dietary Fiber					