



Microbiological Testing
& Consulting, LLC

Place Tracking Label Here

Microbiological Testing and Consulting
 Development, Testing, and Consulting for Personal Care Products
 5661 W. 120th Street; Alsip, IL 60803 773 253 2929
 ISO/IEC 17025:2017 Accredited PJLA Accreditation No. 113977

Sample Submission Form-Analytical/Stability Testing

Company Name		Storage:	<input type="checkbox"/> Room Temp	<input type="checkbox"/> 2-8°C
Company Address		Safety Precautions:	<input type="checkbox"/> Known	<input type="checkbox"/> Unknown
Contact/Phone #		SDS:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
E-Mail		P.O. #		Disposition: <input type="checkbox"/> Discard <input type="checkbox"/> Return

Samples For Submission

Product Name	Production Date	Lot Number	Anhydrous (Yes/No)

Complete Sample Submission Sheet-Select Analytical Stability Service

STG	<input type="checkbox"/> Stability Test-Glass	<input type="checkbox"/> 1Mo <input type="checkbox"/> 3Mo <input type="checkbox"/> 6Mo Other: _____
CT	<input type="checkbox"/> Compatibility Testing Container Size: _____	<input type="checkbox"/> 1 Mo <input type="checkbox"/> 3Mo <input type="checkbox"/> 6Mo Other: _____
STP	<input type="checkbox"/> Stability Test In Packaging	<input type="checkbox"/> 1 Mo <input type="checkbox"/> 3Mo <input type="checkbox"/> 6Mo Other: _____
AW	<input type="checkbox"/> Water Activity (Aw)	
USP 51	<input type="checkbox"/> Antimicrobial Effectiveness Test	<input type="checkbox"/> Standard <input type="checkbox"/> PCPC <input type="checkbox"/> Aged For: _____

Add'l Tests/Comments:

Received By (Sign & Date):		Carton:	<input type="checkbox"/> OK	<input type="checkbox"/> Damaged
Inspected By (Sign & Date):		Samples:	<input type="checkbox"/> OK	<input type="checkbox"/> Damaged