



Romer Labs Inc.
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SUBMISSION FORM – MYCOTOXIN ANALYSIS

CONTACT INFORMATION

| | |
|--------------------|--|
| Company Name: | |
| Ship From Address: | Invoice Address: (if different) |
| Contact Name(s): | Accounts Payable Contact: |
| Email: | Tel: |
| Tel: | Po Number: |

TOXIN/COMBINATION ANALYSES via LCMSMS

Single Toxin Analysis - check 1 of the following toxins:

| | | |
|---------------------------|--------------------|--------------|
| Aflatoxin B1/B2/G1/G2 | Fumonisin B1/B2/B3 | T2/HT2 Toxin |
| Aflatoxin M1 | Ochratoxin A | Zearalenone |
| Deoxynivalenol/ AcetylDON | Patulin | |

Mycotoxin Screen 1 (Aflatoxin, Fumonisin, Zearalenone, Ochratoxin A, Trichothecenes A & B)

Mycotoxin Screen 2 (Aflatoxin, Fumonisin, Zearalenone, Ochratoxin A, T2/HT2 Toxin, DON)

Three Toxin Screen - check any 3 of the following toxins

| | | | | | |
|-----------|-----|-----------|-------------|--------------|----------|
| Aflatoxin | DON | Fumonisin | Zearalenone | Ochratoxin A | T2 Toxin |
|-----------|-----|-----------|-------------|--------------|----------|

Four Toxin Screen - check any 4 of the following toxins:

| | | | | | |
|-----------|-----|-----------|-------------|--------------|----------|
| Aflatoxin | DON | Fumonisin | Zearalenone | Ochratoxin A | T2 Toxin |
|-----------|-----|-----------|-------------|--------------|----------|

Five Toxin Screen - check any 5 of the following toxins:

| | | | | | |
|-----------|-----|-----------|-------------|--------------|----------|
| Aflatoxin | DON | Fumonisin | Zearalenone | Ochratoxin A | T2 Toxin |
|-----------|-----|-----------|-------------|--------------|----------|

Trichothecenes Screen (Type A & Type B)

Type A Trichothecenes (T2 Toxin, HT2 Toxin, DAS, Neosolaniol)

Type B Trichothecenes (DON, AcetylDON, Fusarenon-X, Nivalenol)

SAMPLE INFORMATION

| Sample ID | Commodity | Turn around times | | | |
|-----------|-----------|-------------------|-------|--------|--------|
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |
| | | same day* | 1 day | 3 days | 5 days |

* Same day = Same Day Analysis ONLY available on single toxin analysis. Samples are to be received by 9 am for same day requests; However early receipt does not guarantee results same day.

Date/Signature _____



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SAMPLE SUBMISSION FORM – ADDITIONAL TESTS

CONTACT INFORMATION

| | |
|--------------------|--|
| Company Name: | |
| Ship From Address: | Invoice Address: (if different) |
| Contact Name(s): | Accounts Payable Contact: |
| Email: | |
| Tel: | Tel: Po Number: |

| | |
|--|---|
| <p>Other Single Items Analyses</p> <p>Turnaround time 5 days</p> <ul style="list-style-type: none"> Citrinin (TLC) Cyclopiazonic Acid Moniliformin (TLC) Sterigmatocystin (TLC) | <p>Melamine</p> <p>Turnaround time 5 days</p> <ul style="list-style-type: none"> LC-MS/MS Melamine LC-MS/MS Melamine & Related Compounds (Ammeline, Ammelide, Cyanuric Acid) |
|--|---|

| | | |
|---|---|-------------------------------|
| <p>GMO Analyses indicate technology:</p> <p>Corn Comb (semi-quantitative)</p> <p>Corn Comb includes: CP4 EPSPS, Cry1A, Cry3Bb, CRY1F, PAT, Cry34Ab1, VIP3A</p> | <p>LFD (Lateral Flow Device)</p> <p>Soy Comb (qualitative)</p> <p>Soy Comb includes: CP4 EPSPS, PAT</p> | <p>Turnaround time 5 days</p> |
|---|---|-------------------------------|

| Sample ID | Commodity |
|-----------|-----------|
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Please email or call for more specific turnaround time information for your requested analyses.

Date/Signature _____