Protocol for the Delivery of Samples to Food Microbiology
And Food Safety Laboratory

1. The interested party will contact **Dr. Achyut Adhikari** by phone (225) 578-2529 or by email AcAdhikari@agcenter.lsu.edu. Information about the ingredients and process of the product are required.
2. Dr. Achyut Adhikari will send to the interested party a proposal for the analysis and a quote.
3. Arrangements will be made for setting up the day and condition for the delivery of the samples. All samples must be delivered with a copy of this form.
4. Payment
    a. For shelf life studies 50% deposit is required in advance to start the testing. The remaining 50% must be received before results are sent.
    b. For all other tests 100% is required to perform the test.
5. Tests will be run according to the proposal.
6. The official results report will be sent by email.

_____ _____

Client's signature **Date**

Print Name: _____

Phone: (_____)_____-_____ email address: _____

Company Name: _____

Address: _____**City:** _____**State:** _____ **Zip Code:** _____

Product Name: _____

Date of Production: _____ **Batch #** _____ **Delivery Date:** _____

Storage temperature: - Room temperature ◯ **Cooler** ◯ **Freezer** ◉

Make all checks payable to***: LSU AgCenter***

ATTENTION:
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Office (225) 578-2529
Email: AcAdhikari@agcenter.lsu.edu

Exclusive for Lab. use

Sample ID number: _____

Analysis: