

U.S. Department of Agriculture
Food Safety and Inspection Service

FOOD CHEMISTRY CHECK SAMPLE RESULTS

NOVEMBER 1997

DATE CHECK SAMPLE MAILED:

NAME OF PRODUCT:

[_____]
Label
L _____]

FOOD CHEMISTRY CHECK SAMPLE RESULTS

Round off analytical results to two decimals

Moisture: _____
Protein: _____
Fat: _____
Salt: _____

*Data Reviewed
and Verified By:*

Signature Date

Name:

Title:

RESULTS ARE DUE AT THE ABOVE ADDRESS BY NOVEMBER 28, 1997.

**INSTRUCTIONS FOR REPORTING
FOOD CHEMISTRY CHECK SAMPLE RESULTS**

Response to this information collection is voluntary. This information is needed for laboratories analyzing official meat and poultry samples. This information is used to assure compliance with FSIS Regulations 9 CFR 318, 381, and 391.

The following reporting requirements must be followed:

- * No comments should be made on the Check Sample Results Form.

- * If check samples are received in poor condition, the Accredited Laboratory Program (ALP)/Quality Assurance Branch (QAB) should be notified immediately, by telephone (202-501-7636) and *in writing*. Correspondence must be sent by mail, not faxed. At the discretion of ALP/QAB, replacement sample or an excuse from reporting results may be authorized.

- * All entries should be clearly *typed* on the original form and sent by mail, not Faxed.

- * Name and title of authorized person signing form should be typed below signature.

- * Check sample results must be received *on or before the due date* indicated on the report form. Late results are subject to a CUSUM penalty. Failure to report check sample results could result in revocation of accreditation.

- * ALP/QAB will consider claims regarding check sample results lost in the mail only with acceptable proof of mailing. Acceptable proof of mailing includes receipts from the U.S. Post Office or overnight/express delivery carriers.

- * Request for "Excused Absences" for check sample results must be *in writing*, explaining the reason for the request, and received by ALP/QAB at the address below *before the due date*.

- * If there is evidence to believe that there was a data processing error *at FSIS*, you may request a review. This must be done *in writing* and received by ALP/QAB at the address below *within 30 days* of the date of that report.

- * Retain a copy of your Check Sample Results for your records.

- * All correspondence should be addressed to:

**Accredited Laboratory Program/
Quality Assurance Branch
USDA/FSIS/CTD
Franklin Court Suite, Box 17
Room 6909
1099 14th Street, N.W.
Washington, D.C. 20005**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0583-0082. The time required to complete this information collection is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.