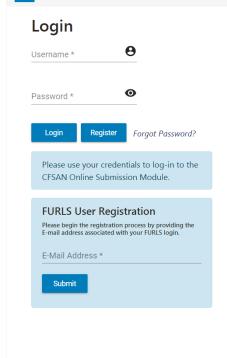
CFSAN Online Submission Module () About

FDA



- - - WARNING - - WARNING - - WARNING - - WARNING - - - This information system is provided for U.S. Government-authorized use only. System User Agreement

You are accessing a U.S. Government information system, the CFSAN Online Submission Module. The information system includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. Any unauthorized or improper usage of this information system is prohibited and may result in disciplinary action as well as civil and criminal penalties. By using this information system, you understand and consent to the following: - Anyone who makes a materially false, fictitious, or fraudulent statement to the U.S. Government is subject to criminal penalties. See Title 18 U.S.C. 1001.

Any information system usage may be monitored, recorded, and subject to audit. Anyone using this information
system expressly consents to monitoring and is advised that if such monitoring reveals possible criminal activity,
system personnel may provide the evidence of such monitoring to law enforcement officials.

You have no reasonable expectation of privacy regarding any communications or data transiting or stored on this
information system. At any time, and for any lawful government purpose, the government may monitor, intercept,
and search and seize any communication or data transiting or stored on this information system.
 Any communications or data transiting or stored in this information system may be disclosed or used for any
lawful government purpose.

Registration Process

Login Information		
User Name *		Password *
User Name must be between 8-24 characters, it should start with alphanumberic characters. Only the hyphen (-) special character allowed	n an alphabet and can contain is allowed. Spaces are not	Password must be at least 8 characters and contain at least one special character, one uppercase letter and one numeric. Space is not allowed.
E-Mail Address *		New Password Confirmation *
Security Questions		
Question1	v	Answer1 *
		Cancel
Continue		

Login Information Address Information			
Address Information			
First Name *	Middle Initial	Last Name *	
Company *	⇒ Title		
Doing Business As (if applicable)			
Mailing Address *			
Mailing Address2			\$ •
City *	Country/Area *	State or Province *	
Zip Code/Postal Code *			
Telephone Number *	Fax Nu	umber	

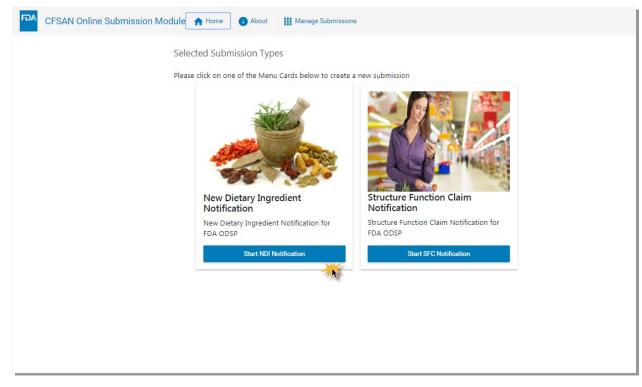
DA	CFSAN Online Submission Module 1 About							
	Registration							
	Login Information	Address Information	Submission Selection					
	Select Submission	- T						

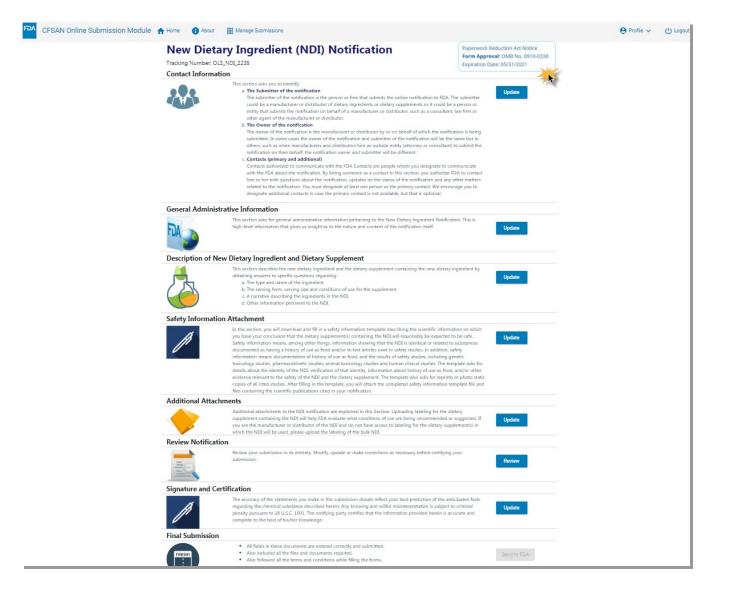
Below are the submission types that may be submitted through the CFSAN Online Submission Module.

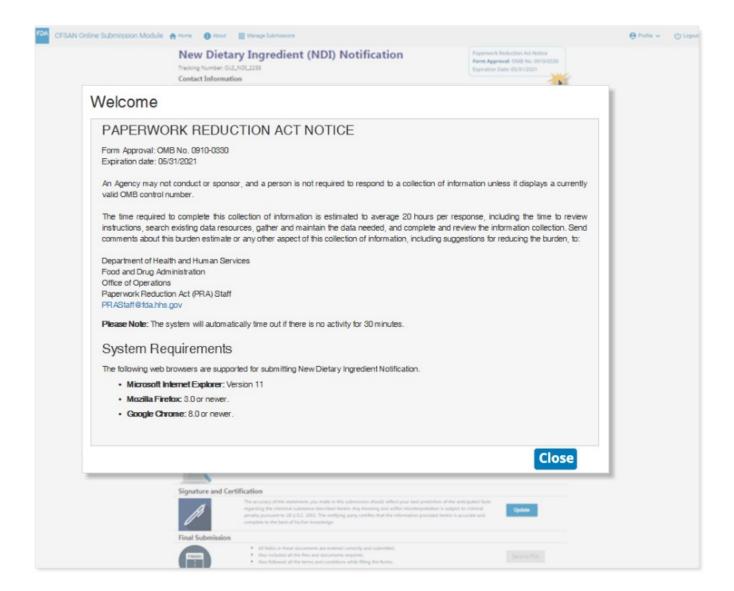
Please note that currently two CFSAN Offices receive submissions through the COSM: The Office of Food Additive Safety (OFAS) and the Office of Dietary Supplement Programs (ODSP). A submission received through the CFSAN Online Submission Module does not constitute acceptance by OFAS/ODSP.

BNF Biotechnology Notification File	FCN Food Contact Notification	NDI New Dietary Ingredient Notification
PNC Pre-Notification Consultation for Food Contact Substance	Generally Recognized As Safe Notice	SFC Structure Function Claim Notification
FAP Food Additive Petition	NPC New Protein Consultation	Inactive
CAP Color Additive Petition		
Other OFAS SUBMISSIONS Please contact OFAS at Premarkt@fda.hhs.gov prior to se	ending these submissions.	
Color Master File	FMF for Food Contact Substance Food Master File	FMF for Food Additives Food Master File
Inactive	Inactive Inactive	Inactive

New Dietary Ingredient Notification Submission







New Diet	ary Ingredient (NDI) Notification		
Tracking Number: O			
Contact Informa			
	This section asks you to identify:		
W	a. The Submitter of the notification The submitter of the notification is the person or firm that submits the online notification to FDA. The submitter could be a manufacturer or distributor of distary ingredients or iterary supplements or it could be a person or entity that submits the notification on behalf of a manufacturer or distributor, such as a consultant, law firm or other agent of the manufacturer or distributor. b. The Owner of the notification The owner of the notification The owner of the notification is the manufacturer or distributor by or on behalf of which the notification is being submitted. In some cases the owner of the notification and submitter of the notification will be the same but in	Update	
	others, such as when manufacturers and distributors hire an outside entity lattomey or consultant) to submit the notification on their behalt the notification owner and submitter will be different. c Contacts (primary and additiona) Contacts authorized to communicate with the FDA Contacts are people whom you designate to communicate with the FDA about the notification. By listing someone as a contact in this section, you authorize FDA to contact him or her with questions about the notification, updates on the status of the notification and any other matters related to the notification. You muit designate the desix on persons on the primary contact. We encourage you to designate additional contacts in case the primary contact is not available, but that is optional.		
General Adminis	strative Information		
	This section asks for general administrative information pertaining to the New Dietary Ingredient Notification. This is high-level information that gives us insight as to the nature and content of the notification itself.	Update	
Description of N	lew Dietary Ingredient and Dietary Supplement		
	This section describes the new dietary ingredient and the dietary supplement containing the new dietary ingredient by obtaining answers to specific questions regarding: a. The type and name of the ingredient. b. The serving form, serving size and conditions of use for the supplement. c. A marative describing the ingredients in the NDL d. Other information pertinent to the NDL	Update	
Safety Informat	ion Attachment		_
A	In this section, you will download and fill in a safety information template describing the scientific information on which you base your conclusion that the dietary supplement(s) containing the ND will reasonaby be expected to be safe. Safety information means, among other things, information showing that the ND is identicion evideate of substances documented as having a history of use as food and/or to test articles used in safety studies, in addition, safety information means, dancy of use as food, and the results of safety studies, in addition, safety information means documentation of history of use as food, and the results of safety studies, including genetic totoxicogy studies, pharmacolichiek studies, anima loxicology studies and human clinica studies. The template asis for details about the identity of the NDI with relation of that ident(h), information about history of use as food, and/or other evidence relation to stafety of the NDI with relative supplement. The template asis as for relations of all cled studies. After filling in the template, you will attach the completed safety information template file and files containing the scientific publications cled in your onficiation.	Update	
Additional Atta	chments		
\	Additional attachments to the NIC notification are explained in this Section. Uploading labeling for the diretary supplement containing the NIC's will help EAP evaluate what conditions of use are being recommended or supplement. You are the manufacturer or distributor of the NIC and do not have access to labeling for the dietary supplement(s) in which the NIC will be used, please upload the labeling of the bulk NIC.	Update	
Review Notifica			
	Review your submission in its entirety. Modify, update or make corrections as necessary before certifying your submission.	Review	
Signature and C	Certification		
	The accuracy of the statements you make in this submission should reflect your best prediction of the anticipated facts		
A	regarding the chemical substance described herein. Any knowing and williul inisinterpretation is subject to oriminal penalty pursue to 18 U.S.C.1001. The notifying party certifies that the information provided herein is accurate and complete to the best of his/her knowledge.	Update	
Final Submission	n		
FINISH!	All fields in these documents are entered correctly and submitted. Also functed all the first and documents required. Also followed all the terms and conditions while filling the forms.	Send to FDA	
	Please ensure that all the above sections are complete before attempting to submit your notification.		



FDA CFSAN Online Submission Module 🏫 Home 👩 About 🔛 Manage Submissions	😝 Profile 🗸	() Logout
New Dietary Ingredient (NDI) Notification Tracking Number: OLS_NDL_2222		
Contact Information @		
Add Contact		
Contact Type * This field is required		
Cancel		
Continue		

FDA	CFSAN Online Submission Module 🏠 Home	About III Manage Submissions			😝 Profile 🗸	ப் Logout
		ary Ingredient (NDI) Notif r: OLS_NDI_2222	fication			
	C C	ontact Information 👩				
	+ Add Contac					
	Submitter	*				
	Owner Primary	/ \$		Cancel		
	Other					

CFSAN Online Submission Mod	ule 🏫 Home 🕕 About 🛛 🏭 Manage Submissions						😝 Profile 🗸	し Logout
	New Dietary Ingredient (NDI) No Tracking Number: OLS_NDI_2222	otificatio	on					
	Contact Information @							
	Add Contact							
	Contact Type *							
	Submitter *	-	Auto-fill the data					
	Contact Description (Select all that apply) *				R			
	Manufacturer of NDI							
	Distributor of NDI							
	Manufacturer of Dietary Supplement Containing NDI							
	Distributor of Dietary Supplement Containing NDI							
	Agent/Attorney/Consultant							
	First Name *		Last Name *					
	Company *		Position					
	Doing Business As (if applicable)							
	Mailing Address *							
	Mailing Address2							
	City * Country/Ar	100.1	- Cta	te or Province *				
	Gay Country/Al			te or rituille				
	Zip Code/Postal Code *		E-Mail Address *					
	Telephone Number *		Fax Number					
	B Save				Cano	el		
	Continue							

FDA	CFSAN Online Submission M	Iodule 🏫 Home 🕤 About 🔛 Manage Sub	omissions				😝 Profile 🗸	ပုံ Logout
		New Dietary Ingredient (N Tracking Number: OLS_NDI_2222	DI) Notificatio	on				
		Contact Information	0					
		Add Contact						
		Contact Type *		A care BH also data				
		Submitter	*	Jackson, AbSolutions Inc	New State			
		Contact Description (Select all that apply) *		Bartholemew, Ax Capitol				
		Manufacturer of NDI Distributor of NDI		Bluementhol, Trade Group, Inc				
		Manufacturer of Dietary Supplement Contain	ning NDI	Brownkowski, Wilies company				
		Distributor of Dietary Supplement Containin	g NDI	Jackson, AbSolutions, Inc (Profile Contact)				
		Agent/Attorney/Consultant						
		First Name *		Last Name *				
		Company *		Position				
		Doing Business As (if applicable)						
		Mailing Address *						
		Mailing Address2						
		City *	Country/Area *	State or Province *				
		Zip Code/Postal Code *		E-Mail Address *				
_	harman and here and h	and a start water of the	- Andrew	and a start water		and the second	, and the second	

Submitter	Ψ.	Auto-fill the data Jackson, AbSolutions Inc	Ŧ
Contact Description (Select all th	at anniv) *		
Manufacturer of NDI			
Distributor of NDI			
Manufacturer of Dietary Supple	ement Containing NDI		
Distributor of Dietary Suppleme	-		
Agent/Attorney/Consultant	y		
First Name *		Last Name *	
Stephen		Jackson	
Company *			
AbSolutions Inc		Position	
Doing Business As (if applicable) Mailing Address * 2305 Bankok Drive			
Mailing Address2			
City *	Country/Area *	State or Province *	
Skanectidy	United States of Ame	rica • New York	•
Zip Code/Postal Code * 59387		E-Mail Address * stephenv.jackson@gmail.com	
Telephone Number *			

FDA CFSAN Online Submission Module	A Home	About 🚻 Manage	Submissions				😝 Profile 🗸	ပုံ Logout
	ew Dietary		(NDI) Notification					
2	Contact Information @							
	Type Name Address Action							
	Primary	Stephen Jackson	2305 Bankok Drive, Skanectidy, NY, 59387, USA	1	i i			
	Submitter	Willie Bartholemew	8527-C Clophappy St, Wing-B, New York, ME, 47673, USA	1	•			
	+ Add Contact							
	Continue				Cancel			

FDA	CFSAN Online Submission Module 🏫 Home 🛛 About 🛛 🏭 Manage Submissions	⊖ Profile ∨	U Logout
	New Dietary Ingredient (NDI) Notification		
	Tracking Number: OLS_NDL2223		
	General Administrative Information		
	1. Name of the New Dietary Ingredient? * 💡		
	Name of the New Distay Ingendient *		
	ND Insredient		
	 Have you designated information in your submission that you view as trade secret or as confidential commercial or financial information? 		
	information? * 👔 () Yes, see attached Designation of Confidential Information		
	 res, see attached besignation of communia miormation Yes, information is designated at the place where it occurs in the submission 		
	No No		
	3. Are you providing a redacted copy of some or all of the notification? * 🥝		
	Yes, redacted copy of complete notification		
	Yes, redacted copy of part(s) of the notification		
	O No		
	4. Are all citations to published information accompanied by reprints or full photo static copies of the publications? * 👔		
	Yes		
	5. Are the notifications and all publications submitted in English or accompanied by a complete and accurate English translation? * 💡		
	Yes		
	O No		
	Cancel		
	75		

FDA CFSAN Online Submission Modul	e 🛧 Home 👔 About 🔛 Manage Submissions		😝 Profile 🗸 🕛 Logout				
	New Dietary Ingredient (NDI) Notifi	ication					
Ti	racking Number: OLS_NDI_2223						
		radiant and Distany Supplement					
	Description of New Dietary Ingredient and Dietary Supplement						
	1. New Dietary Ingredient Type (Check all that apply) 存						
	Vitamin						
	Mineral						
	Herb or other botanical						
	Amino acid						
	Dietary substance for use by man to supplement the di						
	Concentrate, metabolite, constituent, extract, or combin	nation of any ingredient described above					
	2. New dietary ingredient name and related information	0					
	Maximum level of new dietary ingredient in each serving of dietary supplement						
	Max levle						
	NDI Name ND Ingredient	Latin Binomial Name (LBN) * LBN					
	Synonyms and Trade Name	Author of LBN *					
	Synonym	Author LBN					
	Plant Part and Strain * Plant Part						
	Fiant Fait						
	3. Dietary supplement serving form (Check all that apply)	1* 2					
	Describe formulations that are recommended for your NDI	-					
	Bulk Ingredient Supplier? *						
	Tablet	Capsule					
	Powder	Soft gel					
	Liquid	Gelcap					
	Sachet	✓Other					
		Specify the serving form in the text box below					
		Other					
		NDI and all other ingredients in one unit of the dietary supplement). 🧿					
	If the notification concerns an NDI that is a combination of component NDI: Synonyms, Trade Name, Plant Part, Strain	f two or more other NDIs, you should provide the following information for each n, Latin Binomial Name, Author of Latin Binomial Name, and NDI type. Where					
	relevant, also include the following additional information: manufacture (e.g., >99% purity, 50:1 dry leaf extract, or fer	: CAS registry number, Unusual form (e.g., malted barley or immature apples), Type of mentation product).					
	Description of dietary supplement Supplement Description	\$					
	dipplement beschption	· ·					
	5. Conditions of Use of the Dietary Supplement						
	a. Serving instructions (e.g., 'take with food', 'take befor	re bed', 'dissolve in a glass of water' etc. 💡					
	Serving instructions * Serving Instructions Text	\$					
	serving instructions rext						
	b. Dietary Supplement serving size (weight or volumetri duration of use and maximum total daily intake level						
	Serving size *						
	Servina Size Text						
	c. Target populations / excluded populations / other re	astrictions. 🕐					
	Target Populations * Target Population text	\$					
	6. Other 🕐						
	Other Text	Ŷ					
	Save and Continue	Cancel					

CFSAN Online Submission Module 🏠 Home	About III Manage Submissions				😝 Profile 🗸	ပ် Logout
1	New Dietary Ingredient (NDI) Notification					
Т	racking Number: OLS_NDI_2223					
ĥ	Safety Information Attachment 👔					
y ir d p ic ic t t	t this section, you will download and fill in a safety information template describing ou base your conclusion that the dietary supplement(s) containing the NDI will rea formation means, among other things, information showing that the NDI si identi- ocumented as having a history of use as food and/or to test articles used in safety teans documentation of history of use as food, and the results of safety studies, in harmacokinetic studies, animal toxicology studies and human clinical studies. The lentity of the NDI, verification of that identity, information about history of use as for safety of the NDI and the dietary supplement. After filling in the template, you our notification and attach files containing the scientific publications cited in your and the filling in the template.	sonably be expected to cal or related to substa studies. In addition, sa cluding, genetic toxicol template asks for detail ood and/or other evide vill upload the complet	o be safe. Safety nces fety information logy studies, Is about the ence relevant to			
	lease ensure that you do not upload a password protected document. Maxim ccepted file type is .pdf. Only 1 file is allowed to be uploaded in this section.	um allowed file size i	s 10MB.	Drag 'n Drop		
с	lick here to download the Safety Information template file.					
	+ Drag and Drop or Select File					
	Document Name	Size	Actions			
	FDA_Safety_Template TESTING PURPOSES.pdf	0.149 MB				
	Save and Continue		Cancel			

CFSAN Online Submission Module 🏫 Home 🕜 About III Manage Submissions	😝 Profile 🗸 🕛 Logout
New Dietary Ingredient (NDI) Notification	
Tracking Number: OL5_NDL_2223	
Additional Attachments	
Attachments included here may include the following: 🥑	
 Attachments verifying the identity of the dietary ingredient. Attachments of preclinical or clinical studies that the notifier has conducted. Product labels (NDD bilk product label or label for dietary supplement containing the NDI). Letter designating additional contacts authorized to communicate with the FDA. Additional safety information provided as an amendment to the submitted notification. Attachments such as complete copies of all references cited in the safety narrative. A redacted copy of the notification, or a list of information in the notification that the submitter considers to be trade secrets or confidential commercial information. 	
Drag and Drop or Select File	
Sive and Continue . Cancel	

FDA CFSAN Online Submission Module	About 🔛 Manage Submissions		😝 Profile 🗸	பு Logout
	New Dietary Ingredient (NDI) No	otification		
	Tracking Number: OLS_NDI_2223			
	📕 Review Notification 👔 🖶			
	Contact Information	Edit		
	Contact Type: Primary Type of Contact: Owner of the Notification			
	Stephen Jackson AbSolutions Inc	stephenv.jackson@gmail.com		
	2305 Bankok Drive, Skanectidy , NY , USA , 59387 Phone : 30112312345			
	Contact Type: Submitter			
	Contact Description: 1. Manufacturer of NDI			
	Willie Bartholemew Ax Capitol / Trader	wb@ac.com		
	8527-C Clophappy St, Wing-B, New York , ME , USA , 4 Phone : 9649821734	17673		
	General Administrative Information	Edit		
	1. Name of the New Dietary Ingredient	CON		
	ND Ingredient			
	financial information	n that you view as trade secret or as confidential commercial or		
	Yes, see attached Designation of Confidential Inf			
	 Are you providing a redacted copy of some or all of Yes, redacted copy of complete notification 	the notification?		
	4. Are all citations to published information accompan Yes	ied by reprints or full photo static copies of the publications?		
	 Are the notification and all publications submitted in translation? 	English or accompanied by a complete and accurate English		
	Yes			
	Description of New Dietary Ingredie	nt and Dietary Supplement		
	1. Vitamin 2. Herb or other botanical			
	2. New dietary ingredient name and related informatio			
	Maximum level of new dietary ingredient in each ser			
	Max levie			
	NDI Name ND Ingredient	Latin Binomial Name (LBN) LBN		
	Synonyms and Trade Name Synonym	Author of LBN Author LBN		
	Plant Part and Strain			
	Plant Part			
	3. Dietary supplement serving form Bulk Ingredient Supplier? Yes			
	1. Tablet 2. Powder			
	 Other You have an alternative serving form: Other 			
	4. Description of dietary supplement (Include the level	of NDI and all other ingredients in one unit of the dietary		
		is a combination of two or more other NDIs, you should provide Synonyms, Trade Name, Plant Part, Strain, Latin Binomial Name,		
	registry number, Unusual form (e.g., malted barley or	e relevant, also include the following additional information: CAS r immature apples), Type of manufacture (e.g., >99% purity, 50:1		
	dry leaf extract, or fermentation product).) Supplement Description			
	5. Conditions of Use of the Dietary Supplement a. Serving instructions (e.g., 'take with food', 'take	before bed', 'dissolve in a glass of water' etc.		
		umetric measure), serving frequency (# of servings/day, interval		
	between servings), duration of use and maximu Serving Size Text	ım total daily intake level		
	c. Target populations / excluded populations / ot Target Population text	her restrictions		
	6. Other Other Text			
	Safety Information Attachment	Edit		
	FDA_Safety_Template TESTING PURPOSES.pdf			
	Additional Attachments (Optional)	Edit		
	I have reviewed all the information.*			
	Continue			

FDA	CFSAN Online Submission Module 🏫 Home 🕤 About 🔛 Manage Submissions	😝 Profile 🗸	() Logout
	New Dietary Ingredient (NDI) Notification		
	Tracking Number: OLS_NDL_2223		
	Signature and Certification		
	Name of the Responsible Official, Employee, Agent or Attorney *		
	Responsible Party		
	Trile of the Responsible Official, Employee, Agent or Attorney		
	Title of Responsible Party		
	The person named above has reviewed this notification and certifies that it is correct and complete.		

FDA CFSAN Online Submission	n Module 🏫 Home 🛛 🌘	About III Manage Submissions		😝 Profile 🗸	U Logout
	New Dieta	ary Ingredient (NDI) Notification			
	Tracking Number: OL	LS_NDI_2223			
	Contact Informat				
		This section asks you to identify: a To Submitter of the notification is the person or firm that submits the online notification to FDA. The submitter could be annufacturer or distributor of deltary ingredients or delary supprements or it could be a some entry that submits the notification on behalf of a manufacturer or distributor, such as a consultant, law firm or other agent of the manufacturer or distributor. b To Owner of the notification is the manufacturer or distributor by or on behalf of which the notification is being submitted. In some cases the owner of the notification and submitter of the notification will be the same built in others, such as when manufacturers and distributors by or on behalf of which the notification is being submitted. In some cases the owner of the notification and submitter of the notification will be the same built in others, such as when manufactures and distributors by manufacture or consultant) to submit the notification on their behalf. The notification owner and submitter will be different. c contexts authorized to communicate with the FDA Contacts are people whom you designate to communicate with the FDA bloost the modification, yourbase on the status of the notification. We encourage you to designate additional context in cases the primary contacts in advalued, but this optional.	Update 🧭		
	General Administ	trative Information			
		This section asks for general administrative information pertaining to the New Dietary Ingredient Notification. This is high-level information that gives us insight as to the nature and content of the notification itself.	Update 🧭		
	Description of N	ew Dietary Ingredient and Dietary Supplement			
	Description of No	This section describes the new dietary ingredient and the dietary supplement containing the new dietary ingredient by			
		obtaining answers to specific questions regarding: a. The type and name of the inpredient. b. The serving form, serving size and conditions of use for the supplement. c. A narrative describing the ingredents in the NDL d. Other information perfument to the NDL	Update		
	Safety Informatio	on Attachment			
	ß	In this section, you will downoad and fill in a safety information template describing the scientific information on which you base your conclusion that the dietary supplement(s) containing the NDX will reasonably be expected to be safe. Safety information means, among other things, information showing that the NDX is identical or related to substances documented as having a history of use as food and/or to test articles used in safety studies. In addition, safety information means documentation of history of use as food, and the results of safety studies. Including genetic toxicology studies, pharmaccikhelic studies, amina toxicology studies and human clinical studies. The template asks for details about the identity of the NDI, writication of that identity, information about history of use as forod, and/or other evidence relavant to the safety of the NDI and the tellary supplement. The template asks for reprints or proto static copies of all cled studies. After filling in the template, you will atach the completed safety information template file and files containing the scientific publications cells in your notification.	Update 🗸		
	Additional Attac				
		Additional attachments to the NDI notification are explained in this Section. Uploading labeling for the dietary supplement containing the NDI will help FDA evaluate what conditions of use are being recommended or suggested. If you are the manufacturer or distributor of the NDI and do not have access to labeling for the dietary supplement(s) in which the NDI will be used, please upload the labeling of the built NDI.	Update		
	Review Notificati	ion			
	EO	Review your submission in its entirety. Modify, update or make corrections as necessary before certifying your submission.	Review 🗸		
	Signature and Ce	rtification			
	A	The accuracy of the statements you make in this submission should reflect your best prediction of the anticipated facts regarding the chemical substance described herein. Any knowing and willful misinterpretation is subject to criminal penally pursue to 18 U.S.C.DID. The notifying party certifies that the information provided herein is accurate and complete to the best of his/her knowledge.	Update 🗸		
	Final Submission				
	FINISHI	All fields in these documents are entered correctly and submitted. Also included all the files and documents required. Also followed all the terms and conditions while filling the forms.	Send to FDA		



Thank you for using the CFSAN Online Submission Module

The following submission OLS_NDI_2223 has been submitted to the Center for Food Safety and Applied Nutrition (CFSAN) at the FDA.

Please note that your submission has not been officially Accepted or Received. You will receive an email to that effect when that milestone occurs.

If you would like to view this submission or your other submissions, please click the Manage Submissions tab on the CFSAN Online Submission menu above.

To create another submission please click the Home tab on the CFSAN Online Submission menu above.

Fracking Number	Title	Modified Date	Status 🕹	Submission Number	Action
OLS_SFC_1573	New Brand Name	Aug 23, 2018, 7:57:55 AM	SUBMITTED	SFC 2018-000116	0
OLS_SFC_1259		Jul 17, 2018, 2:29:08 PM	SUBMITTED	SFC 2018-000068	0
ols_NDI_1328		Jul 18, 2018, 4:25:59 PM	SUBMITTED	NDI 000050	0
OLS_SFC_1396		Jul 30, 2018, 11:58:31 AM	SUBMITTED	SFC 2018-000093	0
ols_NDI_1436		Aug 5, 2018, 4:15:55 PM	SUBMITTED	NDI 000073	0
OLS_SFC_1435		Aug 5, 2018, 4:16:25 PM	SUBMITTED	SFC 2018-000113	Θ
ols_NDI_1397		Aug 5, 2018, 4:16:39 PM	SUBMITTED	NDI 000074	0
ols_NDI_1324		Jul 18, 2018, 2:00:41 PM	SUBMITTED	NDI 000049	Ø
OLS_SFC_1294		Jul 13, 2018, 3:40:53 PM	SUBMITTED	SFC 2018-000057	Ø
SUS_NDI_1962	Scrackle	Mar 3, 2019, 2:06:36 PM	SUBMITTED		Ø
6LS_NDI_2199	scarafin	Feb 22, 2019, 11:11:26 AM	SUBMITTED		Ø
OLS_SFC_2216	Supplement Name	Mar 4, 2019, 2:51:40 PM	SUBMITTED	SFC 2019-000009	o
OLS_SFC_2221	Supplement Name	Mar 17, 2019, 3:40:23 PM	SUBMITTED	SFC 2019-000011	o
6LS_NDI_2223	ND Ingredient	Mar 17, 2019, 5:42:30 PM	SUBMITTED		Ø
OLS_FCN_1438	Sacharin	Aug 3, 2018, 12:58:39 PM	DRAFT		/ 1
0LS_FCN_1439		Aug 6, 2018, 10:33:44 AM	DRAFT		1
OLS_SFC_1572		Aug 17, 2018, 2:33:56 PM	DRAFT		1
0LS_BNF_1571	Submission Title	Aug 17, 2018, 1:46:50 PM	DRAFT		/ =
OLS_NPC_1495		Aug 9, 2018, 8:52:47 PM	DRAFT		/ 1