

CLIENT DETAILS:

Company name: _____ Reference number: _____

Address: _____

Purchase order number: _____

Contact person: _____

Phone: _____ Date sent: _____

Email: _____

SAMPLE DETAILS:

TESTING REQUIRED:**Nutritional**

- ☐ Acidity
- ☐ Ash
- ☐ Carbohydrates (by difference)
- ☐ Cholesterol
- ☐ Collagen
- ☐ Dietary fibre
- ☐ Energy
- ☐ % Fill
- ☐ Full fatty acid profile
- ☐ Moisture
- ☐ Protein
- ☐ Saturated fat
- ☐ Sodium
- ☐ Sugars
- ☐ Total fat

Preservatives

- ☐ Nitrate
- ☐ Nitrite
- ☐ Phosphorus
- ☐ Salt
- ☐ Sorbic acid
- ☐ Sulphur dioxide

Trace elements minerals

- ☐ Calcium
- ☐ Iron
- ☐ Potassium
- ☐ Selenium

Allergens

- ☐ Gluten
- ☐ Histamine

Additional test requests

*A comprehensive list of testing available can be found on the Awanui Scientific website. Tests may be sub-contracted to an approved laboratory.***Laboratory use only**

Date received: _____

Processed by: _____

Case number label

July 2026