

MOSELEY LABORATORIES, INC

6108 W. Stoner Dr. Greenfield, IN 46140 Phone: 317-866-9528 Fax: 317-866-8450

Customer Information				PO #: N/A		Report#MOS140248				
Company Name: Camel Milk Association						Date of Submission: 3/12/14				
Contact Name: Marlin Troyer						Date Rcvd: 3/12/2014				
Address: 6757 19 Mile Rd.						Date Reported: 3/17/2014				
Marion, IN 49665										
Phone/Fax: 231-878-6528				Testing Required						
Email: mialpaca@hotmail.com				Please choose method below						
Sample Number (For Lab Use)	Sample Description	Other	Aerobic Plate Count – Pour Plate AOAC 996.23 W1.5.4-02	Coliform – Pour Plate BAM-4 W1.5.04-04	Salmonella BAM 5	E.coli W1.5.05.04-15	Listeria sp. – Reveal 2.0 AOAC RI 041101 W1.5.04-06	DMSCC ISBOAH FormFDA 2400		
39597	Raw Milk		1600 cfu/ml	<1 cfu/ml	Negative/10ml	Negative/10ml	Negative/25ml	140,000		
	Time/Date Sample Taken: 9:00AM on 3-11-14									
	Temperature: 34 F									
Comments (For Lab Use Only):	Sample Tested on 3/12/14 at 12:50PM									
For Lab Use: Condition of all samples upon receipt. Good <input checked="" type="checkbox"/> Other <input type="checkbox"/> If other, Describe:										
Warranty Disclaimer: The goods and services sold under this contract are purchased by buyer "as is". The description of the samples of the product tested is that provided by the customer. Company does not guarantee the accuracy of its test results, which results are necessarily subject to the limitations of the test procedures employed. Test results on products other than those of the customer may be used for the customer's internal purposes only. Customer shall not be entitled to any consequential or incidental damages of any kind due to erroneous test results.										
Providing Microbiological and Chemical Testing for the Food and Dairy Industry										

Approved By: Stephanie A. Gray
Stephanie Gray, Laboratory Manager