



Title:

Attachment 1 - COLLECTION REPORT

Effective Date:

10-01-03

Revised: 11/10/05

Brokers' reference no. _____

Port of entry _____ Truck license no. _____

Importer or broker of record
(Name, address, phone) _____

Grower _____ Shipper _____

Address _____ Address _____

Description of product _____

Description of container _____

Brand name _____

Labeled size _____ Product code _____

Invoiced quantity _____ Actual quantity _____

Copy of invoice attached? Y/N Package label attached? Y/N

Carton label attached? Y/N Bulk label attached? Y/N

Warehouse/freezer lot no. _____

Address where sampled _____

Method of collection _____

No. of cartons/drums opened _____

No. of packages/portions from each _____

Weight/volume of portions collected _____

Identified by collector on each portion as _____

Method of sealing _____

Observations or comments about the lot, container(s) or anything else relative to the integrity of the sample collected (*required*): _____

Description of the chain of custody of the sample _____

Date of collection _____ Signature _____

Collector's name _____

Collector's employer _____

Supervising federal representative (if any) _____

Date _____ Agency _____

Signature _____

FDA agent notified of intent of sample collection _____

Date _____ Time _____