



# National Animal Supplement Council



## Preferred Supplier Data Sheet (PSDS) for Raw Material Suppliers and Contract Manufacturers

**All Raw Material Suppliers and Contract Manufacturers must provide the information requested in this form as part of the qualification procedure for acceptance as a Preferred Supplier by NASC.** Any fields not applicable to your company should be completed by entering N/A.

Please return copies of the completed form(s) and requested certifications electronically to Bill Bookout at [b.bookout@nasc.cc](mailto:b.bookout@nasc.cc) or mail to:

NASC  
 PO Box 5168  
 Sun City West, AZ 85376

This information will be posted in the Members Section of the NASC Web Site for companies to download for use in qualifying and accepting the supplier.

Questions: contact Bill Bookout at the NASC office (760-751-3360 X1)

<b>SECTION 1: SITE OVERVIEW</b>			
NAME AND ADDRESS OF COMPANY OR SITE RESPONSIBLE:	ESM Technologies LLC. DBA Stratum Nutrition 2213 Missouri Ave, Carthage MO 64836		
WEB SITE:	www.stratumnutrition.com		
CONTACT PERSON	Chris Haynes (Director of Global Sales), Danny Long (Director of Quality)		
TELEPHONE NUMBER:	417-358-4822		
E-MAIL:	<a href="mailto:chaynes@stratumnutrition.com">chaynes@stratumnutrition.com</a> , <a href="mailto:dlong@stratumnutrition.com">dlong@stratumnutrition.com</a>		
<b>BUSINESS DESCRIPTION / SITE DETAILS:</b> manufacturer, distributor			
FACILITY SIZE / # EMPLOYEES:	20,000 sq. ft. / 40 employees	DATE EST:	2002
GENERAL AND PRODUCT LIABILITY INSURANCE LEVELS:	See attached Certificate of Liability Insurance (customer specific, example attached)	UNION:	N/A
SPECIFY TYPE(S) OF INGREDIENT(S), MANUFACTURING CAPABILITIES, PRODUCTS PRODUCED/SUPPLIED BY THE SITE, SERVICES AND THEIR INTENDED APPLICATIONS:	Production of dietary supplement ingredients for both human and animal consumption. Distribution of other qualified dietary supplement ingredients.		
SITE ACTIVITIES CONDUCTED:	Manufacturing, Warehousing, Distribution		
ORGANIZATIONAL CHART:	Attached		

<b>SECTION 2: EVIDENCE OF COMPLIANCE</b>			
INDEPENDENT QUALITY CERTIFICATIONS:	IF YES, SPECIFY: NSF International, ASI Food Safety		
	QUALITY MANAGEMENT SYSTEM STANDARD:	cGMP	
	APPROVAL CERTIFICATES:	NSF, ASI	
	NUMBER AND NAME OF REGISTRAR WHO PROVIDED CERTIFICATE OF APPROVAL:		
OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS:			
WEB SITE:			
DATE OF LAST FDA OR STATE AGENCY CGMP INSPECTION AND OUTCOME (PROVIDE COPY OF REPORT OF OBSERVATIONS FROM LAST FDA OR STATE INSPECTION):	04/10/18, No observations. Report attached.		



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<b>SECTION 3: RAW MATERIAL SUPPLIERS &amp; CONTRACT MANUFACTURERS ONLY</b>	
DO YOU HAVE Q/C RELEASE REQUIREMENTS FOR ALL SHIPMENTS WHEN THEY ARRIVE: (YES / NO)	YES
DO YOU SAMPLE EVERY LOT OF RAW MATERIALS RECEIVED: (YES / NO)	YES
DO YOU RE-PACK LARGE QUANTITIES INTO SMALLER QUANTITIES AT YOUR FACILITY: (YES / NO)	NO
DO YOU SAMPLE EVERY LOT: (YES / NO)	YES
DO YOU PERFORM ANY BLENDING AT YOUR FACILITY (YES / NO)	YES
<b>LIST ALL INGREDIENTS HELD AT YOUR FACILITY (ATTACH A LIST/DOCUMENT IF AVAILABLE: (YES / NO)</b>	
PHARMACEUTICAL:	NO
NUTRITIONAL:	YES
BOTANICAL:	YES
MINERAL:	YES
ENZYME:	YES
HORMONE:	NO
PROBIOTIC:	YES
CHEMICAL (OTHER):	YES
<b>METHODS CONDUCTED IN FACILITY: (YES / NO)</b>	
DO YOU USE AN IN-HOUSE LOT NUMBERING SYSTEM?	YES
DO YOU EVER MIX MULTIPLE LOTS OF THE SAME INGREDIENT WHEN YOU BLEND?	YES
<b>TESTING INFORMATION:</b>	
<b>*IF YOU RELY ON BOTH IN-HOUSE AND OUTSIDE CONTRACT LABS, PLEASE FILL OUT BOTH SECTIONS*</b>	
DOES THIS FACILITY RELY ON AN <b>IN-HOUSE</b> LAB? (YES / NO)	YES
IN-HOUSE TESTS PERFORMED: (YES / NO)	YES
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	YES
RAW MATERIAL ASSAY? (YES / NO)	YES
MICROBIAL? (YES / NO – IF YES SPECIFY)	YES - APC, YM, Coliform, Entero., Salmonella, E Coli, Staph., Pseudomonas, Listeria
pH? (YES / NO)	YES
MOISTURE? (YES / NO)	YES
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	NO
HEAVY METALS? (YES / NO – IF YES SPECIFY)	NO
OTHER? (YES / NO – IF YES SPECIFY)	YES, both chemical and physical tests as well as identity testing (FTIR, NIR, Immunoassay)
<b>IF YOU HAVE AN IN-HOUSE LAB</b> PLEASE SPECIFY WHICH LAB ACCREDITATION ORGANIZATION(S) YOU ARE AFFILIATED WITH:	Not accredited but inspected by NSF International and ASI Food Safety.



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<b>OUTSIDE CONTRACT LABS USED</b>	
PLEASE LIST YOUR MOST FREQUENTLY USED CONTRACT LABS AND THEIR ACCREDITATION STATUS: (e.g., ISO, FDA, USDA, AOAC, USP, NSF, NPA, A2LA, ANSI, ETC.) <b>*PLEASE PROVIDE ACCREDITATION NUMBER*</b>	
<b>NAME OF LAB #1:</b>	Eurofins Frontier Global Sciences
ADDRESS / LOCATION:	11720 North Creek Parkway North, Suite 400 Bothell WA 98011
CONTACT NAME / PHONE NUMBER:	Darren Miller / 425-686-3564
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO 17025:2005 (Accreditation No 66887)
<b>TESTING PERFORMED BY THE OUTSIDE LAB:</b>	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	NO
RAW MATERIAL ASSAY? (YES / NO)	NO
MICROBIAL? (YES / NO – IF YES SPECIFY)	NO
pH? (YES / NO)	NO
MOISTURE? (YES / NO)	NO
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	NO
HEAVY METALS? (YES / NO – IF YES SPECIFY)	YES – Lead, Arsenic, Mercury, Cadmium
OTHER? (YES / NO – IF YES SPECIFY)	
<b>NAME OF LAB #2:</b>	Merieux NutriSciences
ADDRESS / LOCATION:	3600 Eagle Nest Drive, North Building Crete IL 60417
CONTACT NAME / PHONE NUMBER:	David Barnes / 905-305-2203
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO 17025:2005 (Certificate No 1105.01, 1307.01)
<b>TESTING PERFORMED BY THE OUTSIDE LAB:</b>	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	NO
RAW MATERIAL ASSAY? (YES / NO)	NO
MICROBIAL? (YES / NO – IF YES SPECIFY)	YES, Salmonella
pH? (YES / NO)	NO
MOISTURE? (YES / NO)	NO
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	YES, see attached Pesticide Statement
HEAVY METALS? (YES / NO – IF YES SPECIFY)	NO
OTHER? (YES / NO – IF YES SPECIFY)	YES, Total Protein
<b>NAME OF LAB #3:</b>	
ADDRESS / LOCATION:	
CONTACT NAME / PHONE NUMBER:	
LIST ANY CERTIFICATIONS FOR THE LAB:	
<b>TESTING PERFORMED BY THE OUTSIDE LAB:</b>	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	
RAW MATERIAL ASSAY? (YES / NO)	
MICROBIAL? (YES / NO – IF YES SPECIFY)	
pH? (YES / NO)	
MOISTURE? (YES / NO)	
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	
HEAVY METALS? (YES / NO – IF YES SPECIFY)	
OTHER? (YES / NO – IF YES SPECIFY)	



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**SECTION 4: CGMP COMPLIANCE DETAILS**

PROVIDE A BRIEF SUMMARY OF HOW THE SUPPLIER COMPLIES WITH EACH APPLICABLE ELEMENT OF THE CURRENT GMP GUIDELINES. NON-APPLICABLE ELEMENTS SHOULD BE NOTED AS SUCH.

See attached Quality Manual

IS FACILITY ISO CERTIFIED? YES / NO: IF YES SPECIFY THE ISO STANDARD AND ATTACH CURRENT CERTIFICATE.	NO
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LIST AND ATTACH ANY OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS (E.G., NSF, USP, NPA, ISO, ETC.):	NSF International, ASI Food Safety
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SPECIFY MOST RECENT FACILITY INSPECTIONS BY STATE, FEDERAL, OR  
FOREIGN AGENCY (DATE OF INSPECTION, AND RESULTS OF THE INSPECTION SPECIFY AGENCY):

DATE	INSPECTION AGENCY	RESULTS OF THE INSPECTION
04/10/18	Missouri Dept. of Health on behalf of FDA	No observations.

**SECTION 5: ADDITIONAL INFORMATION**

Hazard Plan (HACCP) / DATE IMPLEMENTED:	January 2016
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STATISTICAL PROCESS CONTROL/PROCESS ANALYTICAL CONTROL:	N/A
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CORPORATE BIOTERRORISM ACT COMPLIANCE:	April 2018
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DESCRIBE ALL MEASURES TAKEN BY FACILITY TO ENSURE PRODUCT QUALITY AND PRODUCT CONTAMINATION PREVENTION.	See attached Quality Manual
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MEMBERSHIP IN INDUSTRY TRADE GROUPS:	Council for Responsible Nutrition (CRN), Global Curcumin Association
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**SECTION 6: CONTRACT MANUFACTURERS**

HOW DO YOU GUARANTEE BANNED SUBSTANCES (STIMULANTS, NARCOTICS, STEROIDS, DIURETICS, BETA-2-AGONISTS, BETA BLOCKERS, MASKING AGENTS, OR SIMILAR SUBSTANCES) ARE NOT PRESENT IN YOUR INGREDIENTS?	
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HOW DO YOU QUALIFY AN INGREDIENT MANUFACTURER?	See attached Quality Manual
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**SECTION 7: AUTHENTICITY OF INFORMATION & CONTACT INFORMATION**

COMPANY NAME:	ESM Technologies LLC DBA Stratum Nutrition		
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CONTACT NAME:	Danny Long	TITLE:	Director of Quality
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E-MAIL ADDRESS:	dlong@stratumnutrition.com		
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BY SIGNING BELOW, I CERTIFY THAT THE INFORMATION GIVEN BY ME TO THE NATIONAL ANIMAL SUPPLEMENT COUNCIL (NASC), INC. IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF THE INFORMATION PROVIDED IS NOT THOROUGH AND COMPLETE, NASC WILL REJECT THE FORM AND RESUBMISSION OF THE FORM WILL BE REQUIRED.

 <b>SIGNATURE</b>	<b>November 1, 2018</b> <b>DATE</b>
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