



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 Parker at b.parker@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 Parker at the NASC office (760-751-3360 X105)

SECTION 1: SITE OVERVIEW			
NAME AND ADDRESS OF COMPANY OR SITE RESPONSIBLE:	Elite Health Partners 1725 Skyway Drive, Suite 150 Longmont, CO 80504		
WEB SITE:	www.elitehealthpartners.com		
CONTACT PERSON	Nicole Zeiner		
TELEPHONE NUMBER:	(720) 961-9650		
E-MAIL:	quality@elitehealthpartners.com		
BUSINESS DESCRIPTION / SITE DETAILS:			
FACILITY SIZE / # EMPLOYEES:	4,000 sq. ft. / 26 employees	DATE EST:	March 2014
GENERAL AND PRODUCT LIABILITY INSURANCE LEVELS:	\$4,000,000 and \$2,000,000	UNION:	N/A
SPECIFY TYPE(S) OF INGREDIENT(S), MANUFACTURING CAPABILITIES, PRODUCTS PRODUCED/SUPPLIED BY THE SITE, SERVICES AND THEIR INTENDED APPLICATIONS:	Dietary Supplements, Animal Supplements, including CBD and traditional supplements. We formulate, manufacture, pack, and label products for human and animal consumption.		
SITE ACTIVITIES CONDUCTED:	Batching (mixing, heating, filling) and packaging of tinctures, mints, tea bags, lip balm, and pet tinctures containing CBD derived from hemp.		
ORGANIZATIONAL CHART:	* See Attached		

SECTION 2: EVIDENCE OF COMPLIANCE			
INDEPENDENT QUALITY CERTIFICATIONS:	Yes: IF YES, SPECIFY: 21 CFR 111 and ISO 22716		
	QUALITY MANAGEMENT SYSTEM STANDARD:	21 CFR 111, ISO 22716	
	APPROVAL CERTIFICATES:	Yes	
	NUMBER AND NAME OF REGISTRAR WHO PROVIDED CERTIFICATE OF APPROVAL:	SGS	
OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS:	CDPHE, FDA registration		
WEB SITE:	www.elitehealthpartners.com		
DATE OF LAST FDA OR STATE AGENCY CGMP INSPECTION AND OUTCOME (PROVIDE COPY OF REPORT OF OBSERVATIONS FROM LAST FDA OR STATE INSPECTION):	N/A		



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SECTION 3: RAW MATERIAL SUPPLIERS & CONTRACT MANUFACTURERS ONLY	
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)	Yes
DO YOU SAMPLE EVERY LOT: (YES / NO)	Yes
DO YOU PERFORM ANY BLENDING AT YOUR FACILITY (YES / NO)	Yes
LIST ALL INGREDIENTS HELD AT YOUR FACILITY (ATTACH A LIST/DOCUMENT IF AVAILABLE: (YES / NO)	
PHARMACEUTICAL:	No
NUTRITIONAL:	Yes
BOTANICAL:	Yes
MINERAL:	Yes
ENZYME:	Yes
HORMONE:	No
PROBIOTIC:	No
CHEMICAL (OTHER):	Yes
METHODS CONDUCTED IN FACILITY: (YES / NO)	
DO YOU USE AN IN-HOUSE LOT NUMBERING SYSTEM?	Yes
DO YOU EVER MIX MULTIPLE LOTS OF THE SAME INGREDIENT WHEN YOU BLEND?	Yes
TESTING INFORMATION:	
IF YOU RELY ON BOTH IN-HOUSE AND OUTSIDE CONTRACT LABS, PLEASE FILL OUT BOTH SECTIONS	
DOES THIS FACILITY RELY ON AN <u>IN-HOUSE</u> LAB? (YES / NO)	Yes
IN-HOUSE TESTS PERFORMED: (YES / NO)	Yes
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	No
RAW MATERIAL ASSAY? (YES / NO)	No
MICROBIAL? (YES / NO – IF YES SPECIFY)	No
pH? (YES / NO)	Yes
MOISTURE? (YES / NO)	No
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	No
HEAVY METALS? (YES / NO – IF YES SPECIFY)	No
OTHER? (YES / NO – IF YES SPECIFY)	N/A
IF YOU HAVE AN IN-HOUSE LAB PLEASE SPECIFY WHICH LAB ACCREDITATION ORGANIZATION(S) YOU ARE AFFILIATED WITH:	None



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OUTSIDE CONTRACT LABS USED

PLEASE LIST YOUR MOST FREQUENTLY USED CONTRACT LABS AND THEIR ACCREDITATION STATUS: (e.g., ISO, FDA, USDA, AOAC, USP, NSF, NPA, A2LA, ANSI, ETC.) *PLEASE PROVIDE ACCREDITATION NUMBER*

NAME OF LAB #1:	Gobi Labs Hemp
ADDRESS / LOCATION:	3924 Youngfield St. Wheat Ridge, CO 80033
CONTACT NAME / PHONE NUMBER:	Jon Person/ 712-898-7780
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO 17025
TESTING PERFORMED BY THE OUTSIDE LAB:	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	Yes
RAW MATERIAL ASSAY? (YES / NO)	Yes
MICROBIAL? (YES / NO – IF YES SPECIFY)	Yes
pH? (YES / NO)	No
MOISTURE? (YES / NO)	No
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	Yes
HEAVY METALS? (YES / NO – IF YES SPECIFY)	Yes
OTHER? (YES / NO – IF YES SPECIFY)	Yes- Residual Solvents
NAME OF LAB #2:	Advanced Laboratories
ADDRESS / LOCATION:	40 West Louise Avenue Salt Lake City, UT 84115
CONTACT NAME / PHONE NUMBER:	Brad Draper/ 801-485-1800
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO 17025
TESTING PERFORMED BY THE OUTSIDE LAB:	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	No
RAW MATERIAL ASSAY? (YES / NO)	No
MICROBIAL? (YES / NO – IF YES SPECIFY)	Yes
pH? (YES / NO)	No
MOISTURE? (YES / NO)	No
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	No
HEAVY METALS? (YES / NO – IF YES SPECIFY)	Yes
OTHER? (YES / NO – IF YES SPECIFY)	No
NAME OF LAB #3:	Botanacor
ADDRESS / LOCATION:	1301 S. Jason Street, Unit K Denver, CO 80223
CONTACT NAME / PHONE NUMBER:	Scott Hansen/ 720-460-3489
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO 17025
TESTING PERFORMED BY THE OUTSIDE LAB:	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	Yes
RAW MATERIAL ASSAY? (YES / NO)	Yes
MICROBIAL? (YES / NO – IF YES SPECIFY)	Yes
pH? (YES / NO)	No
MOISTURE? (YES / NO)	No
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	Yes
HEAVY METALS? (YES / NO – IF YES SPECIFY)	Yes
OTHER? (YES / NO – IF YES SPECIFY)	Yes- Residual Solvents



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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.
The facility is certified to 21 CFR 111 and ISO 22716 by a third party (SGS), maintains an FDA registration for dietary supplements, and employs high qualified individuals in all aspects of manufacturing to ensure a sufficient and compliant QMS is implemented and maintained for the production of all products manufactured onsite.

IS FACILITY ISO CERTIFIED? YES / NO: IF YES SPECIFY THE ISO STANDARD AND ATTACH CURRENT CERTIFICATE.	Yes- ISO 22716
LIST AND ATTACH ANY OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS (E.G., NSF, USP, NPA, ISO, ETC.):	CDPHE License

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
03.30.2020	CDPHE	Pass

SECTION 5: ADDITIONAL INFORMATION

Hazard Plan (HACCP) / DATE IMPLEMENTED:	In-Process
STATISTICAL PROCESS CONTROL/PROCESS ANALYTICAL CONTROL:	Controlled through QMS
CORPORATE BIOTERRORISM ACT COMPLIANCE:	Yes, registered with the FDA as a food facility
DESCRIBE ALL MEASURES TAKEN BY FACILITY TO ENSURE PRODUCT QUALITY AND PRODUCT CONTAMINATION PREVENTION.	Controlled through cGMP and QMS
MEMBERSHIP IN INDUSTRY TRADE GROUPS:	N/A

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?	Raw materials are tested upon receipt, prior to release to ensure they meet the material specifications.
HOW DO YOU QUALIFY AN INGREDIENT MANUFACTURER?	Vendor qualification is performed in accordance with compliance to 21 CFR 111 requirements. There is an SOP that dictates specific policy and qualification plan requirements.

SECTION 7: AUTHENTICITY OF INFORMATION & CONTACT INFORMATION

COMPANY NAME:	Elite Health Partners		
CONTACT NAME:	Nicole Zeiner	TITLE:	Director of Quality
E-MAIL ADDRESS:	nicole@elitehealthpartners.com		



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.



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SIGNATURE	DATE