



**Preferred Supplier Other Products & Services Data Sheet (OPSDS)**

**SECTION 1. COMPANY INFORMATION**

COMPANY NAME:	Pet Solutions Group
MAILING ADDRESS:	1021 Peruque Crossing Ct
CITY, STATE, ZIP:	O Fallon, MO 63366
WEB SITE:	n/a
YEARS ESTABLISHED:	17 years

**SECTION 2. GENERAL QUESTIONS**

LIST OF PRODUCTS & SERVICES:	Business consulting on formulation, regulatory, marketing, sales, etc
NAME OF INDIVIDUAL FILLING OUT FORM:	George Collings
LIST OF INDUSTRIES YOUR COMPANY NORMALLY PROVIDES SERVICES FOR:	Pet Food/Specialty Pet Food
LIST ANY OTHER RELEVANT INFORMATION WE SHOULD TAKE INTO CONSIDERATION:	"Friend of NASC" per Bill Bookout

**SECTION 3. EVIDENCE OF COMPLIANCE**

LIST ANY CERTIFICATIONS YOU MIGHT HAVE (IF APPLICABLE):	n/a	
ARE YOU INSPECTED BY ANY STATE, FEDERAL OR FOREIGN AGENCIES (YES OR NO):	no	
SPECIFY MOST RECENT INSPECTIONS BY STATE, FEDERAL OR FOREIGN AGENCIES:	n/a	
DATE AND RESULTS OF INSPECTION:	n/a	
<b>DATE</b>	<b>INSPECTION AGENCY</b>	<b>RESULTS OF INSPECTION</b>
HOW OFTEN ARE YOUR AUDITED / INSPECTED:	n/a	
ATTACH CERTIFICATION DOCUMENTS:	n/a	



**SECTION 4 SUPPORTING DOCUMENTATION**

**ATTACH ANY APPLICABLE DOCUMENTATION**

<u>EXAMPLES:</u>	<u>ATTACHED: YES / NO / N-A</u>
• AUDIT CERTIFICATIONS:	n/a
• FACILITY INSPECTION DOCUMENTS:	n/a
• OTHER:	n/a

**SECTION 6. ADDITIONAL INFORMATION**

ADDITIONAL COMMENTS / INFORMATION:	n/a
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**SECTION 7. CONTACT INFORMATION**

CONTACT NAME:	George Collings
TITLE:	President and CEO
OFFICE PHONE:	636-534-1542
OTHER PHONE:	314-610-9376
E-MAIL:	gcollings@petssg.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.

	4-14-2022
<b>SIGNATURE</b>	<b>DATE</b>