



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:	Cyanotech Corporation 73-4460 Queen Kaahumanu Hwy, #102 Kailua-Kona, HI 96740		
WEB SITE:	www.Cyanotech.com		
CONTACT PERSON	Jen Johansen		
TELEPHONE NUMBER:	808-334-9407		
E-MAIL:	jjohansen@cyanotech.com		
BUSINESS DESCRIPTION / SITE DETAILS: Microalage producers / 96 acre farm, manufacturing, testing and R&D facilities			
FACILITY SIZE / # EMPLOYEES:	26,824 square feet	DATE EST:	1984
GENERAL AND PRODUCT LIABILITY INSURANCE LEVELS:	General: \$2M Product Liability: \$10M	UNION:	N/A
SPECIFY TYPE(S) OF INGREDIENT(S), MANUFACTURING CAPABILITIES, PRODUCTS PRODUCED/SUPPLIED BY THE SITE, SERVICES AND THEIR INTENDED APPLICATIONS:	Ingredients: Spirulina Powder, Spirulina Tablets, Astaxanthin Extract/Oil MFG: Microalgae harvest processing, drying, cracking, milling, supercritical CO2 extraction, tableting.		
SITE ACTIVITIES CONDUCTED:	Bulk powder production, bulk tableting, supercritical CO2 extraction, laboratory testing, R&D		
ORGANIZATIONAL CHART:	Attached		
SECTION 2: EVIDENCE OF COMPLIANCE			
INDEPENDENT QUALITY CERTIFICATIONS:	YES, 5: OK Kosher, IFANCA Halal, Non-GMO Project Verified, Gluten Intolerance Group, Vegan.org		
	QUALITY MANAGEMENT SYSTEM STANDARD:	YES	
	APPROVAL CERTIFICATES:	YES	
	NUMBER AND NAME OF REGISTRAR WHO PROVIDED CERTIFICATE OF APPROVAL:	5 listed above & Mereiux GMP audit	
OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS:	SMETA-Sedex Social Compliance Audit, Glyphosate Free/Detox Project certification, Informed Choice certification. Kuleana Green Business (Chamber of Commerce Sustainability Program)		
WEB SITE:	www.cyanotech.com		
DATE OF LAST FDA OR STATE AGENCY CGMP INSPECTION AND OUTCOME (PROVIDE COPY OF REPORT OF OBSERVATIONS FROM LAST FDA OR STATE INSPECTION):	FDA inspection March 2018, No 483s, 482 Notice of Inspection Attached.		



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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:	NO
ENZYME:	NO
HORMONE:	NO
PROBIOTIC:	NO
CHEMICAL (OTHER):	NO
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 IN-HOUSE LAB? (YES / NO)	YES, and 3 rd party labs
IN-HOUSE TESTS PERFORMED: (YES / NO)	YES
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	YES, if applicable
RAW MATERIAL ASSAY? (YES / NO)	YES
MICROBIAL? (YES / NO – IF YES SPECIFY)	YES
pH? (YES / NO)	NO
MOISTURE? (YES / NO)	YES
ELEMENTAL PESTICIDES? (YES / NO – IF YES SPECIFY)	YES, on a periodic basis
HEAVY METALS? (YES / NO – IF YES SPECIFY)	YES
OTHER? (YES / NO – IF YES SPECIFY)	YES, identity
IF YOU HAVE AN IN-HOUSE LAB PLEASE SPECIFY WHICH LAB ACCREDITATION ORGANIZATION(S) YOU ARE AFFILIATED WITH:	N/A, 3 rd party GMP audited



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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:	Eurofins
ADDRESS / LOCATION:	6304 Ronald Reagan Ave. Madison, WI 53704
CONTACT NAME / PHONE NUMBER:	Hollis Cloninger-Briggett Wills / 608-949-3073
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO/IEC 17005:2017
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, identity
NAME OF LAB #2:	Silliker Inc – Cypress CA laboratory
ADDRESS / LOCATION:	6360 Gateway Drive, Cypress CA 90630
CONTACT NAME / PHONE NUMBER:	Vue Thao / vue.thao@silliker.com
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)	NO
OTHER? (YES / NO – IF YES SPECIFY)	NO
NAME OF LAB #3:	Intertek
ADDRESS / LOCATION:	711 Parkland CT Champaign, IL 61821
CONTACT NAME / PHONE NUMBER:	Noah Morgan-Courtney Johnson/ 217-352-6060
LIST ANY CERTIFICATIONS FOR THE LAB:	ISO 9001:2015, ISO 17025
TESTING PERFORMED BY THE OUTSIDE LAB:	
POTENCY ASSAY OF RAW MATERIALS? (YES / NO)	YES, Astaxanthin
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)	NO
OTHER? (YES / NO – IF YES SPECIFY)	NO



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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.

Table with 2 columns: Question (IS FACILITY ISO CERTIFIED? YES / NO: IF YES SPECIFY THE ISO STANDARD AND ATTACH CURRENT CERTIFICATE. LIST AND ATTACH ANY OTHER CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS (E.G., NSF, USP, NPA, ISO, ETC.):) and Answer (NO, Mereiux, GMP audit certificate attached)

SPECIFY MOST RECENT FACILITY INSPECTIONS BY STATE, FEDERAL, OR FOREIGN AGENCY (DATE OF INSPECTION, AND RESULTS OF THE INSPECTION SPECIFY AGENCY):

Table with 3 columns: DATE, INSPECTION AGENCY, RESULTS OF THE INSPECTION. Rows include inspections from May 2022, June 2019, and March 2018.

SECTION 5: ADDITIONAL INFORMATION

Table with 2 columns: Question (Hazard Plan (HACCP) / DATE IMPLEMENTED: STATISTICAL PROCESS CONTROL/PROCESS ANALYTICAL CONTROL: CORPORATE BIOTERRORISM ACT COMPLIANCE: DESCRIBE ALL MEASURES TAKEN BY FACILITY TO ENSURE PRODUCT QUALITY AND PRODUCT CONTAMINATION PREVENTION. MEMBERSHIP IN INDUSTRY TRADE GROUPS:) and Answer (Implemented in 2007, Process Controls and CCPs in place, YES, Registered with FDA as a Food Facility, CCPs in place & monitored, SSOPs in place, Equipment swabbing for microbes, American Herbal Products Association)

SECTION 6: CONTRACT MANUFACTURERS

Table with 2 columns: Question (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? HOW DO YOU QUALIFY AN INGREDIENT MANUFACTURER?) and Answer (N/A)

SECTION 7: AUTHENTICITY OF INFORMATION & CONTACT INFORMATION

Table with 4 columns: COMPANY NAME: (Cyanotech Corporation), CONTACT NAME: (Jen Johansen), TITLE: (VP Quality, Regulatory & Gov. Affairs), E-MAIL ADDRESS: (jjohansen@cyanotech.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.

Table with 2 columns: SIGNATURE (handwritten signature) and DATE (1/4/2023)