

**CERTIFICATE OF ANALYSIS
ANNOUNCEMENT WFBF1 - INVITATION _____**

PACK DATE _____ **EXPORT CONTRACT VEPD** _____ **MILLPOINT** _____

NOTICE TO DELIVER VEPD _____ **COMMODITY** _____

LOT NO. _____ **PACK SIZE** _____

CAR/TRUCK _____

QUANTITY: _____ **MT** _____ **LBS** _____ **BAGS** _____

ALL PURPOSE FLOUR ITEMS

TEST RESULTS

FAIL

DISCOUNT

PROTEIN (NX5.7,%) 9.0 MIN	_____	_____	_____
MOISTURE, 14.0% MAX	_____	_____	_____
ASH, % (SEE TABLE 2 IN ANN.)	_____	_____	_____
CALCIUM, MG/LB. 500 MIN / 625 MAX	_____	_____	_____
VITAMIN A PALMITATE, IU/LB 8,800 MIN	_____	_____	_____
FALLING NUMBER 175 MIN / 350 MAX	_____	_____	_____
VOMITOXIN, 1 PPM MAX	_____	_____	_____

BREAD FLOUR ITEMS

TEST RESULTS

FAIL

DISCOUNT

PROTEIN (NX5.7,%) 11.3 MIN	_____	_____	_____
MOISTURE, 14.0% MAX	_____	_____	_____
ASH, % (SEE TABLE 2 IN ANN.)	_____	_____	_____
CALCIUM, MG/LB. 500 MIN / 625 MAX	_____	_____	_____
VITAMIN A PALMITATE, IU/LB 8,800 MIN	_____	_____	_____
FALLING NUMBER 200 MIN / 300 MAX	_____	_____	_____
VOMITOXIN, 1 PPM MAX	_____	_____	_____

_____ BAGS AND MARKINGS MEET CONTRACT REQUIREMENTS.
_____ PRODUCT CONFORMS TO FDA DEFECT ACTION LEVEL GUIDELINES.
_____ RAILCARS HAVE BEEN PROPERLY COOPERED.

COMMENTS _____

SIGNATURE _____
TITLE _____
TELEPHONE _____
FAX _____

*INSTRUCTIONS - FILL IN ALL BLANKS.
IF A SPECIFICATION ITEM IS NON-COMPLIANT, PLACE AN "X" ON THE APPROPRIATE "FAIL" LINE AND FILL IN THE DISCOUNT PUBLISHED IN THE ANNOUNCEMENT. IF THE NON-COMPLIANT TEST RESULT DOES NOT HAVE A PUBLISHED DISCOUNT, IMMEDIATELY PHONE THE MARKETING SPECIALIST NAMED ON THE NOTICE TO DELIVER FOR INSTRUCTIONS.*

IF SPECIFICATIONS ARE COMPLIANT OR FALL IN THE PUBLISHED DISCOUNT RANGE, SUBMIT CERTIFICATE OF ANALYSIS WITH INVOICE PACKAGE TO:

*KANSAS CITY FINANCE OFFICE
FINANCIAL OPERATIONS DIVISION, PCB-VIPS, STOP 8578
PO BOX 419205
KANSAS CITY, MO 64141-6205 TELEPHONE: 816-926-6205*