



Preferred Supplier Non-Botanical Ingredient Data Sheet (N-BIDS)

NASC established a **Preferred Supplier Program** for companies who wish to provide products and services to NASC member companies, including raw materials (ingredients), contract manufacturing (dosage form products and feed supplements), analytical laboratory services and other services such as insurance, business consulting, legal expertise, etc.

The goal of the program is to prequalify vendors so that NASC members may accept and use products or services from Preferred Suppliers without additional vendor qualification procedures required under NASC cGMPs.

There are four categories of **NASC Preferred Suppliers**: Raw Material Suppliers, Contract Manufacturers, Analytical Laboratories and Service Providers.

The qualification procedure includes providing information to NASC on the scope of company operations, quality compliance program certifications, statements and additional documentation specific to the type of supplier, e.g., data sheets for each ingredient a Raw Material Supplier would like to qualify and include in the program.

Preferred Supplier Non-Botanical Ingredient Data Sheet

All Raw Material Suppliers must provide the information requested in this form as part of the qualification procedure for a single non-botanical ingredient. Any fields not applicable to the company or ingredient should be completed by entering N/A.

Please return copies of the requested certifications and the completed form electronically to Bill Parker at b.parker@nasc.cc or mail to:

NASC PO Box 5168 Sun City West, AZ 85376

Contact Bill Parker at the NASC office (760-751-3360, X105) with any questions about the **Preferred Supplier Program**.





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SECTION 1. INGREDIENT & SUPPLIER INFORMATION		
SUPPLIER (COMPANY) PROVIDING INGREDIENT:	International Flavors & Fragrances, Inc Madison	
	Bifidobacterium longum ssp. infantis Bi-26™ 50B CFU/g	
INGREDIENT NAME & CODE:	Code for 1 kg Package: 61018395	
	Code for 20 kg Package: 61018396	
GENERAL INGREDIENT INFORMATION:	Freeze-dried probiotic powder	

SECTION 2. MANUFACTURING INFORMATION	
NAME AND ADDRESS OF MANUFACTURING SITE:	3322 -3329 Agriculture Drive
MODE OF MANUFACTURING	Fermentation, concentration, pelletizing, freeze- drying, packaging
DESCRIBE MANUFACTURING PROCESS (ATTACH FLOW CHART IF AVAILABLE):	See HACCP Flow Chart and Food Safety Plan
STERILIZATION OF FUMIGATION METHOD(S):	Fermentation media sterilized prior to inoculation. No fumigation
KNOWN OR POTENTIAL SOURCES OF IMPURITIES AND/OR CONTAMINANTS:	N/A

SECTION 3. INGREDIENT PHYSICAL / CHEMICAL INFORMATION		
	Bifidobacterium infantis	
COMMON OR USUAL NAME / OTHER NAMES:	NASC-recognized ingredient designation: Dried lactic acid bacteria or Dried bifidobacterium fermentation product	
EXAMPLE OF CURRENT PRODUCT SPECIFICATION SHEET / CERTIFICATE OF ANALYSIS ATTACHED:	Yes – see attached	
% ACTIVE INGREDIENT:	100%	
BIOASSAY METHOD (SPECIFY):	Enumeration	
PHYSICAL FORM OF THE INGREDIENT:	Powder	
PARTICLE SIZE:	Milled to 40-mesh	
COUNTRY OF ORIGIN:	USA	





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CONTROL POINT	21 CFR 111, Subpart L &	21 (CFR 117, 21 CFR Part 11, 21 CFR Part 1.5
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	S THAT		FR Part 1.9 Subpart O
		See	e HACCP Flow Chart Attached
LIST ANY CERTIFICATIONS OR EXTERNAL AUDIT PROGRAMS (E.G., NSF, USP, NPA, ISO, ETC.):		2005 CFF	11 CFR 111 and 21 CFR 117), FSSC 22000 , ISO/TS 22002-1: 2009), NSF/ANSI 455-2 (21 R 117, 21 CFR Part 11, 21 CFR Part 1.5 FR Part 1.9 Subpart O)
ST RECENT FACIL	LITY INSPECT	TION	IS (STATE, FEDERAL, OR FOREIGN
INSPECTION A	AGENCY		RESULTS OF INSPECTION
te			No Findings
te (on behalf of FDA	٨)		No Findings
FEED / FOOD INGREDIENT: AAFCO APPROVED YES / NO:			
STED IN THE CATION:	Bifidobacteri	um ir	nfantis
PRODUCT / CERTIFICATE D:	Yes		
BIOASSAY METHOD (SPECIFY):		1	
DIENT: URE FUNCTION ' RESEARCH /			
TARIFF CODE FOR IMPORT/EXPORT:		0	
IONS FOR USE ANIMALS?			
ANY INTERACTION WITH OTHER INGREDIENTS OR DRUGS TO AVOID?			
	INS OR GRAMS (E.G., C.): IST RECENT FACIL INSPECTION A IE IE (on behalf of FDA IE (on behalf of FDA IE (ON BEHALF) INT: AAFCO STED IN THE CATION: PRODUCT / CERTIFICATE D: ECIFY): IDIENT: URE FUNCTION / RESEARCH / ORT/EXPORT: IONS FOR USE ANIMALS? HOTHER	NS OR GRAMS (E.G., C.): ST RECENT FACILITY INSPECTION AGENCY The te (on behalf of FDA) NT: AAFCO STED IN THE CATION: PRODUCT / CERTIFICATE D: ECIFY): ECIFY): ENUMERATION PROPORT: DIENT: JRE FUNCTION / RESEARCH / DRT/EXPORT: STED IN THE CATION: PRODUCT / CERTIFICATE D: STED IN THE CATION: PRODUCT / CERTIFICATE ON: STED IN THE CATION / CERTIFICATE ON: STED	NSF/ANSI 173 (2 (ISO 22000:2005 CFR 111, 21 CFF Subpart L & 21 C ST RECENT FACILITY INSPECTION INSPECTION AGENCY THE SEE (On behalf of FDA) NT: AAFCO PRODUCT Yes ECIFY): ECIFY): EDIENT: URE FUNCTION PRODUCT YES CONTRIBUTE STREET ON THE CATION: PRODUCT YES ECIFY): ENUMERATION PRODUCT YES ECIFY: ENUMERATION PRODUCT YES ENUMERATION PRODUCT





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SECTION	5 SUPPORTING DOC	TIMENTATION

ATTACH ANY STATEMENT FOR THE INGREDIENT THAT ARE APPLICABLE TO THIS INGREDIENT.

<u>EXAMPLES</u>	ATTACHED: YES / NO / N-A
KOSHER / HALAL STATEMENT	See Attached
IRRADIATION STATEMENT	Yes
ETO STATEMENT	See Attached
GMO STATEMENT	See Product Description
MSDS SHEET	See SDS
HORMONE STATEMENT	N/A
BSE / TSE STATEMENT	N/A
ORGANIC CERTIFICATION STATEMENT	N/A
CURRENT PRODUCT DATA SHEET	See Product Description
MANUFACTURING PROCESS FLOW CHART	See Freeze-Dried Cultures Manufacturing Flow Chart
STABILITY DATA	See Attached
MATERIAL EVALUATION FORM	
COUNTRY OF ORIGIN STATEMENT	See Product Description

SECTION 6. ADDITIONAL INGREDIENT INFORMATION		
RECOMMENDED STORAGE CONDITIONS:	See Product Description	
ADDITIONAL COMMENTS / INFORMATION:		

SECTION 7. CONTACT INFORMATION		
CONTACT NAME:	Miriam Carnovale	
TITLE:	Senior Specialist, Regulatory Affairs NAM	
OFFICE PHONE:	+1 302-927-9777	
OTHER PHONE:	+1 215-919-1302	
E-MAIL;	Miriam.Carnovale@iff.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.		
Miriam Carnovale		03/11/2024
SIGNATURE		DATE





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