

**Alliance Analytical Laboratories, Inc.**

179 West Randall Street
Coopersville, MI 49404
Phone: (616) 837-7670
Fax: (616) 837-7701



Test methods marked with ^ are accredited under the laboratory's ISO/IEC 17025:2017 accreditation issued by ANSI National Accreditation Board. Refer to certificate and scope of accreditation AT-2044

TEST RESULTS REPORT**CUSTOMER**

Kats Botanicals - Grey
750 Hickory Industrial Dr
Old Hickory TN 37138,
Phone: 203-671-0370
Email: mike@katsbotanicals.com;
bryan@katsbotanicals.com;

SAMPLE DESCRIPTION

KB-BKP-D55-WB1 Kratom Powder Lot 3082 KB-GREY

SAMPLE DATE**DATE RECEIVED**

4/20/2026

REFERENCE NUMBER

202969944: 2622557

Customer PO**TEMPERATURE AT RECEIVING**

Test Requested	Test Method	Results	Ref Number	Start Date
7-OH PPM on Dry Weight Basis		<107 ppm	20172:101	4/20 11:56 AM
	Analyst: 64			
Moisture		5.67 %	20175:115	4/20 3:30 PM
	Analyst: 59			
Kratom P3				
7 Hydroxymitragynine		<0.01 %	20172:101	4/20 11:56 AM
	Analyst: 64			
Mitragynine		1.54 %	20172:101	4/20 11:56 AM
	Analyst: 64			
Aerobic Plate Count	^Bam Ch 3	Log: 2.4	300 cfu/g	4/20 2:18 PM
	Analyst: 40			
Coliform	^AOAC 991.14	Log: <2.0	<100 cfu/g	4/20 12:23 PM
	Analyst: 40			
Mold	^Bam Ch18	Log: <2.0	<100 cfu/g	4/20 2:18 PM
	Analyst: 40			
Staphylococcus aureus	CMMEF 39.52	<3 mpn/g		4/20 12:23 PM
	Analyst: 40			
Yeast	^Bam Ch18	Log: <2.0	<100 cfu/g	4/20 2:18 PM
	Analyst: 40			
E.coli Generic	^AOAC 991.14	Log: <2.0	<100 cfu/g	4/20 12:23 PM
	Analyst: 40			

It is the customer's responsibility to evaluate the compliance of these results to any regulatory requirement.
Test results apply to the sample as received.

**THIS DOCUMENT CONTAINS TRADE SECRET/CONFIDENTIAL INFORMATION
PURSUANT TO 5 U.S.C.(b)(4)**

This report must not be reproduced, except in full, without written approval of the laboratory.

Reviewed and Approved by:

Audrey Monroe - Laboratory Director

Date: 4/27/2026

Date: 4/27/2026

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TEST RESULTS REPORT

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SAMPLE DATE
DATE RECEIVED 4/20/2026
REFERENCE NUMBER 202969944: 2622557 **Customer PO**
TEMPERATURE AT RECEIVING



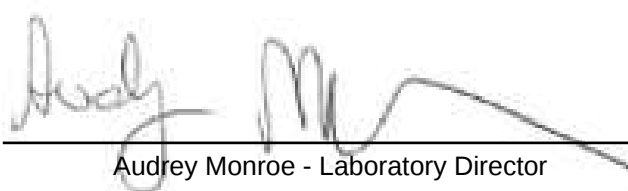
Test Requested	Test Method	Results	Ref Number	Start Date
Salmonella	^AOAC 2009.03 Analyst: 40	Negative/25g		4/20 11:53 AM Kit Lot Number: SL09052514E
Arsenic	Analyst: 45	0.592 mg/kg	20179:47	4/21 6:40 AM
Cadmium	Analyst: 45	<0.5 mg/kg	20179:47	4/21 6:40 AM
Lead	Analyst: 45	0.581 mg/kg	20179:47	4/21 6:40 AM
Mercury	Analyst: *212 ID#8001	<0.20 mg/kg	26D1069-01	4/22 12:00 PM *Subcontracted EPA 7471B

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Alliance Analytical Laboratories Inc.
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Suite A
Coopersville, MI 49404

SAMPLE SUBMITTAL FORM

APR 20 AM 11:02

616-837-7670 - Phone
616-837-7701 - Fax

Client Name Kats Botanicals (04/16/2026)		P O Number or Project Identification 1ZR1C2170304981435 (UPS)		Report Data To Mike Greenberg	
Address 750 Hickory Industrial Drive		Contact Person Mike Greenberg		Phone and Fax 203-671-0370	
City Old Hickory	State TN	Zip Code 37138		email mike@katsbotanicals.com	
Sample Site No. If Applicable	Lot Number	SAMPLE DESCRIPTION	ANALYSIS REQUESTED Use Sample Key	Special Reporting Requirements	
3557 KB-GREY	3082	KB-BKP-D55-WB1 Kratom Powder	P3 (RUSH)	70H ppm dry weight	
3558 KB-GREY	3083	KB-BKP-D55-WB1 Kratom Powder	P3 (RUSH)	70H ppm dry weight	
3559 KB-GREY	3084	KB-BKP-D55-WB1 Kratom Powder	P3 (RUSH)	70H ppm dry weight	
3560 KB-GREY	3085	KB-BKP-D55-WB1 Kratom Powder	P3 (RUSH)	70H ppm dry weight	

Analytical Test Request KEY

Please call 616-837-7670 if you require a test not listed

T-1 Total Aerobic Plate Count	\$18.00	T-6 Mitragynine	\$80.00
T-2 E.coli OR Coliform	\$15.00 Each	T-7 7-Hydroxymitragynine	\$80.00
T-3 Yeast & Mold	\$18.00	T-8 Heavy metals	\$115.00
T-4 Listeria sp.	\$45.00	T-9 Staphylococcus sp.	\$20.00
T-5 Salmonella	\$55.00 FDA BAM		
	\$35.00 PCR		

PACKAGES

P1 \$120.00	Total Aerobic Plate Count, E.coli, coliform, Yeast, Mold, Staphylococcus sp, Salmonella
P2 \$230.00	Mitragynine, 7 hydroxymitragynine, Heavy metals
P3 \$320.00	Total Aerobic Plate Count, E.coli, coliform, Yeast, Mold, Staphylococcus sp, Salmonella, mitragynine, 7 hydroxymitragynine, and heavy metals

Each sample submitted receives a \$2.00 fee associated with them. Testing packages do not incur this fee.

For Office Use Only:
Date/Time Received _____

Temp (°F) _____

Sample Condition _____

Initials _____