Alliance Analytical Laboratories, Inc.

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

TEST RESULTS REPORT

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

CUSTOMER	Kats Botanicals 750 Hickory Industrial Drive Old Hickory TN 37138, Phone: 203-671-0370 Email: mike@katsbotanicals.com; bryan@katsbotanicals.com;
SAMPLE DESCRIPTION	Kratom Powder KB-TPS Lot 985
SAMPLE DATE	3/31/2026
DATE RECEIVED	4/3/2026
REFERENCE NUMBER	202969944: 2619480 **Customer PO**
TEMPERATURE AT RECEIVING	



Test Requested	Test Method		Results	Ref Number	Start Date
7-OH PPM on Dry Weight Basis	Analyst: 64		<105 ppm		4/6 8:42 AM
Moisture	Analyst: 59		4.71 %	20175:96	4/6 4:11 PM
Kratom P3 7 Hydroxymitragynine	Analyst: 64		<0.01 %	20172:87	4/6 8:42 AM
Mitragynine	Analyst: 64		1.65 %	20172:87	4/6 8:42 AM
Aerobic Plate Count	^Bam Ch 3 Analyst: 40	Log: 2.4	300 cfu/g		4/3 2:55 PM
Coliform	^AOAC 991.14 Analyst: 40	Log: 2.4	300 cfu/g		4/3 2:55 PM
Mold	^Bam Ch18 Analyst: 40	Log: <2.0	<100 cfu/g		4/3 2:55 PM
Staphylococcus aureus	CMMEF 39.52 Analyst: 40		<3 mpn/g		4/3 2:55 PM
Yeast	^Bam Ch18 Analyst: 40	Log: <2.0	<100 cfu/g		4/3 2:55 PM
E.coli Generic	^AOAC 991.14 Analyst: 40	Log: <2.0	<100 cfu/g		4/3 2:55 PM

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: Andrea Balduck - Laboratory Manager Date: 4/13/2026

Date: 4/13/2026

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SAMPLE DATE	3/31/2026
DATE RECEIVED	4/3/2026
REFERENCE NUMBER	202969944: 2619480 **Customer PO**
TEMPERATURE AT RECEIVING	



Test Requested	Test Method	Results	Ref Number	Start Date
Salmonella	^AOAC 2009.03 Analyst: 40	Negative/25g		4/3 2:44 PM Kit Lot Number: GDSSL09052514E
Arsenic	Analyst: 45	0.584 mg/kg	20179:25	4/7 9:24 AM
Cadmium	Analyst: 45	<0.5 mg/kg	20179:25	4/7 9:24 AM
Lead	Analyst: 45	<0.5 mg/kg	20179:25	4/7 9:24 AM
Mercury	Analyst: *212 ID#8001	<0.19 mg/kg	26D0215-03	4/8 12:00 PM *Subcontracted EPA 7471B

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Alliance Analytical Laboratories Inc.
179 West Randall Street
Suite A
Coopersville, MI 49404

SAMPLE SUBMITTAL FORM

APR 3 AM 11:43

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

Client Name	P.O Number or Project Identification	Report Data To:
Kats Botanicals - TPS (3//31/26) RUSH	TPS USPS 9405550105795022091607	Mike Greenberg Page 1 of 1

Address	Contact Person	Phone and Fax
750 Hickory Industrial Drive	Mike Greenberg	203-671-0370

City	State	Zip Code	email
Old Hickory	TN	37138	mike@katsbotanicals.com

Sample Site No. if Applicable	Lot Number	SAMPLE DESCRIPTON	ANALYSIS REQUESTED Use Sample Key	Special Reporting Requirements
KB-TPS	983	9478 Kratom Powder	P3 - RUSH	7OH ppm dry weight
KB-TPS	984	9479 Kratom Powder	P3 - RUSH	7OH ppm dry weight
KB-TPS	985	9480 Kratom Powder	P3 - RUSH	7OH ppm dry weight
KB-TPS	986	9481 Kratom Powder	P3 - RUSH	7OH 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 recieves 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_____