

**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGRICULTURE
BUREAU OF FOOD SAFETY AND LABORATORY SERVICES
LABORATORY DIVISION**

Facility/Laboratory Name: _____

QUARTERLY DISPENSER ACCURACY CHECK

Test Kit for Use _____

Calibration Location: On-site Other Name: _____

Date _____	Date _____	Date _____	Date _____
Dispenser ID _____	Dispenser ID _____	Dispenser ID _____	Dispenser ID _____
Analyst _____	Analyst _____	Analyst _____	Analyst _____

Series	Volume in mls			Series	Volume in mls			Series	Volume in mls			Series	Volume in mls
1				1				1				1	
2				2				2				2	
3				3				3				3	
4				4				4				4	
5				5				5				5	
6				6				6				6	
7				7				7				7	
8				8				8				8	
9				9				9				9	
10				10				10				10	
Average				Average				Average				Average	

Frequency: Ten (10) Volume checks are required **Quarterly** for each dispenser. Individual dispensers must be etched, identified and tagged with the average volume. Tolerance permitted – 5% of volume. If out of calibration, send back to manufacturer.

Procedure: Use a Class “A” graduated 10 ml. Dispense as used during test procedure.