

TYPE OF SUBMISSION: ORIGINAL AMENDED

COSMETIC PRODUCT INGREDIENT STATEMENT

(In accordance with 21 CFR 720)

Read Instruction Booklet Before Completing. Type entries in CAPITAL LETTERS.

FOR FDA USE ONLY ON ORIGINAL SUBMISSIONS

FDA CPIS NO. **F** _____ FILING DATE _____

NOTE: This report is authorized by Public Law 21 U.S.C. 371(a); 21 CFR 720. While you are not required to respond, your cooperation is needed to make the results of this voluntary program comprehensive, accurate, and timely.

01	1. COMMON, USUAL, OR CHEMICAL NAME							
	2. 9 - DIGIT CAS NO.		3. TYPE OF ACTION		4. DATE OF ACTION ____ - ____ - ____		5. CONF	
	6. BASE CPIS NO. F _____		7. BASE NAME OR TRADE NAME MATERIAL B _____			8. COMPANY NAME		
02	1. COMMON, USUAL, OR CHEMICAL NAME							
	2. 9 - DIGIT CAS NO.		3. TYPE OF ACTION		4. DATE OF ACTION ____ - ____ - ____		5. CONF	
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Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:

DHHS/FDA/CFSAN
Office of Cosmetics and Colors
Cosmetics Programs & Regulations Branch (HFS-106)
5100 Paint Branch Parkway
College Park, MD 20740-3835

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.