

Laboratory Request Form

SAMPLE INFORMATION

PRODUCT NAME		DATE
NEW	USED	MACHINE (S)
MANUFACTURED BY:		
CUSTOMER:		SALESMAN:
APPLICATION (How Product is Used):		

ACTION REQUIRED

CHECK SAMPLE TYPE:	CUTTING OIL	STAMPING OIL	DRAWING OIL	LUBE OIL	QUENCH OIL	CLEANER
WATER SOLUBLE METALWORKING FLUID	WATER SOLUBLE RUST PREVENTIVE		SOLVENT OIL RUST PREVENTIVE			
ANALYZE:			MAINTENANCE ANALYSIS:			
CHECK QUALITY:			SPECIFIC TESTS REQUIRED (List Below):			

TYPING & DISTRIBUTION

SALESMAN & FILE:	"HOUSE" FILE:
FILE ONLY:	COMPETITIVE FILE:
PLEASE TYPE:	CHARGE CUSTOMER:
HOLD FOR SALESMAN APPROVAL:	SPECIAL GRAPHING REQUESTED:
CUSTOMER (PLEASE INDICATE CONTACT):	
OTHER:	

STATUS

PROJECT NUMBER:	
DATE LABWORK COMPLETED BY LAB:	
DATE SUPPORT SERVICES RECEIVES FROM LAB:	
DATE TYPED REPORT IS SENT TO LAB FOR PROOFING:	
PROOFING IS APPROVED BY LAB FOR DISTRIBUTION:	
DATE DISTRIBUTED:	