

REQUEST FOR AND RESULTS OF TESTS

PAGE NO.

NO. OF PAGES

SECTION A - REQUEST FOR TEST

1. TO: <i>(Include ZIP Code)</i>		2. FROM: <i>(Include ZIP Code)</i>		
3. PRIME CONTRACTOR AND ADDRESS <i>(Include ZIP Code)</i>		4. MANUFACTURING PLANT NAME AND ADDRESS <i>(Include ZIP Code)</i>		
CONTRACT NUMBER		P.O. NUMBER		
5. END ITEM AND/OR PROJECT	6. SAMPLE NUMBER	7. LOT NO.	8. REASON FOR SUBMITTAL	9. DATE SUBMITTED
10. MATERIAL TO BE TESTED	10a. QUANTITY SUBMITTED	11. QUANTITY REPRESENTED		12. SPEC. & AMEND AND/OR DRAWING NO. & REV. FOR SAMPLE & DATE
13. PURCHASED FROM OR SOURCE		14. SHIPMENT METHOD	15. DATE SAMPLED AND SUBMITTED BY	
16. REMARKS AND/OR SPECIAL INSTRUCTIONS AND/OR WAIVERS.				
17. SEND REPORT OF TEST TO				

SECTION B - RESULTS OF TEST *(Continue on plain white paper if more space is required)*

1. DATE SAMPLE RECEIVED	2. DATE RESULTS REPORTED	3. LAB REPORT NUMBER		
4. TEST PERFORMED	RESULTS OF TEST	SAMPLE RESULT	REQUIREMENTS	
DATE	TYPED NAME AND TITLE OF PERSON CONDUCTING TEST	SIGNATURE		