***Actlabs Materials Testing – Sample Submission Form***

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| CONTACT INFORMATION | |  | PRIORITY |
| **NAME** |  |  | **NEXT DAY**  100% Surcharge Applies |
| **COMPANY** |  |  | **RUSH**  50% Surcharge Applies |
| **ADDRESS** |  |  | **REGULAR**  5-10 Business Days |
| **PHONE** |  | DESIRED DELIVERY | |
| **EMAIL** |  | / / 201\_\_ | |

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| --- | --- | --- |
| PAYMENT INFORMATION | | PURCHASE ORDER # |
|  | **PAYMENT INCLUDED**  Make all cheques payable to *Activation Laboratories Ltd.* |  |
|  | **CREDIT CARD**  Attach Card Number, Expiry Date, Full Name & Signature | QUOTATION # |
|  | **ON ACCOUNT**  For credit, refer to Credit Application Form |  |

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| SAMPLE INFORMATION | | |
| **SAMPLE ID**  Please write ID on Samples or Tags | **MATERIAL INFORMATION**  Specifications | **ANAYSIS REQUESTED**  Please include any Standards |
|  |  |  |
| SPECIAL INSTRUCTIONS / COMMENTS | | |
|  | | |

A completed copy of this form must accompany all shipments. Failure to include this form may cause delay in analyses and may also be subject to an administration fee. **Sample submission form for Actlabs Materials Testing only.**