



Laboratory:
WearCheck USA
501 Madison Ave.
Cary, NC 27513
USA

Ship To:

LIBERTY DISPOSAL
6401 S EASTERN AVE
OKLAHOMA CITY, OK 73149
US

7 3 1 4 9

Carton Contents:



10 x Sample Bottles
10 x Sample Mailers
10 x Sample Information Forms (SIFs)
SIF# WC0825492 to WC0825501



W C - F L E E T

▼ scan to track samples from this carton and/or to manage these sample kits



CARTON ID
210290

▼ keep for your records * THESE LABELS PEEL OFF * ▼ place on return shipping box

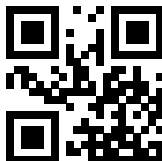


← scan to track carton/samples

Customer:

Shipped:

ID# 210290



ID# 210290



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0825492

WC sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or any associate company even though by negligence or other fault. WC shall not be liable or responsible for the future performance or failure of any engine, piece of equipment or material involved in any test or sample. The Company makes no warranties, representations, or guaranties with respect to the performance of any such engine, piece of equipment, or material.

CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

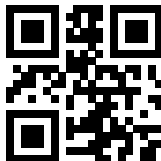
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0825492



WC0825492



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0825493

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

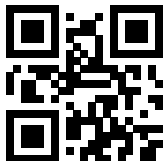
▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:



WC0825493

WC0825493



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ▶



WC0825494

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

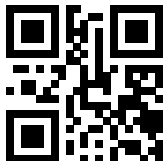
▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:



WC0825494

WC0825494



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0825495

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0825495

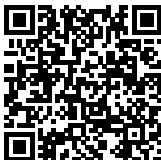


WC0825495



WEAR CHECK

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WC0825496

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

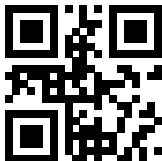
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0825496

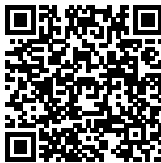


WC0825496



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0825497

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

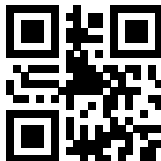
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0825497



WC0825497



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0825498

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

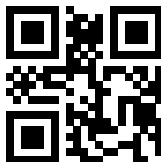
▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:



WC0825498

WC0825498



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0825499

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

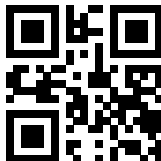
▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:



WC0825499

WC0825499



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0825500

WC sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or any associate company even though by negligence or other fault. WC shall not be liable or responsible for the future performance or failure of any engine, piece of equipment or material involved in any test or sample. The Company makes no warranties, representations, or guaranties with respect to the performance of any such engine, piece of equipment, or material.

CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

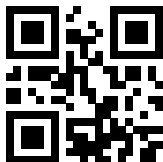
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

_____ Sample Date: _____

WC0825500



WC0825500



WEAR CHECK

SCAN TO COMPLETE **ON-LINE** ►



WC0825501

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CUSTOMER CODE: **SEAOKL**

AREA: **BONAIRE**

EMAIL/ATTN: _____

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

UNIT NUMBER: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Transmission (Auto)	<input type="checkbox"/> Swing Drive
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Transmission (Manual)	<input type="checkbox"/> Differential
<input type="checkbox"/> Gasoline Engine	<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Planetary
<input type="checkbox"/> Propane Engine	<input type="checkbox"/> Hydrostatic	<input type="checkbox"/> Final Drive
<input type="checkbox"/> Biogas Engine	<input type="checkbox"/> Power Take Off	<input type="checkbox"/> Brake
	<input type="checkbox"/> Steering	<input type="checkbox"/> Other _____

Location: Front Rear Left Right Other _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other _____

TIME ON UNIT: _____

TIME ON OIL: _____

CHANGED: YES / NO

TIME ON FILTER: _____

SERVICED: YES / NO

Comments:

Add Tests: 1000-012

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

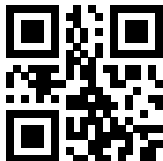
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

WC0825501



WC0825501