

Laboratory: WearCheck Canada Inc. C8-1175 Appleby Line Burlington, ON L7L 5H9 CANADA

## Ship To: CANADIAN BEARINGS LTD. (Branch 10) 1600 DREW ROAD MISSISSAUGA, ON L5S 1S5 CA L 5 S 1 S 5

## Carton Contents:



12 x Sample Bottles

- 12 x Sample Mailers
- 12 x Sample Information Forms (SIFs)
- SIF# CB0031702 to CB0031713



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





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





scan to track carton/samples Customer:

Shipped:







| •   | <b>OR</b> COMPLETE THIS INFORMATION |  |
|---|-------------------------------------|--|
| COMPANY:  |                                     |  |
| ADDRESS:  |                                     |  |
|   | STATE/PROV:                         |  |
| ZIP/POSTAL:   | PHONE:                              |  |
| EMAIL/ATTN:   |                                     |  |
| UNIT No.:   |                                     |  |
| MAKE:   | _MODEL:                             |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                                     |  |
| Other   |                                     |  |
| OIL BRAND & GRADE:  |                                     |  |
| SAMPLE DATE: MM / DD / YY                                       |                                     |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                                     |  |

 TIME ON OIL:
 CHANGED: YES / NO

 TIME ON FILTER:
 SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL   | OR COMPLETE THIS INFORMATION |  |
|---|------------------------------|--|
| COMPANY:  |                              |  |
| ADDRESS:  |                              |  |
|   | STATE/PROV:                  |  |
|   | PHONE:                       |  |
| EMAIL/ATTN:   |                              |  |
| UNIT No.:   |                              |  |
|   | _MODEL:                      |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                              |  |
| Other   |                              |  |
|   |                              |  |
|   |                              |  |
| SAMPLE DATE: <u>MM/DD/YY</u>                                    |                              |  |
| TOTAL TIME ON UNIT: HO  | URS / KILOMETERS / MILES     |  |

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO TIME ON FILTER: SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION              |             |  |
|---|-------------|--|
| COMPANY:  |             |  |
| ADDRESS:  |             |  |
|   | STATE/PROV: |  |
|   | PHONE:      |  |
| EMAIL/ATTN:   |             |  |
| UNIT No.:   |             |  |
| MAKE: MO  | DEL:        |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |             |  |
| Other   |             |  |
| OIL BRAND & GRADE:  |             |  |
| SAMPLE DATE:MM / DD / YY_                                       |             |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |             |  |

TIME ON OIL:

TIME ON FILTER: \_\_\_\_

CHANGED: YES / NO SERVICED: YES / NO

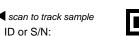
Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE





Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION |   |  |
|---|---|--|
| COMPANY:  |   |  |
| ADDRESS:  |   |  |
|   | STATE/PROV:                             |  |
|   | PHONE:                                  |  |
| EMAIL/ATTN:   |   |  |
| UNIT No.:   |   |  |
|   | MODEL:                                  |  |
| COMPONENT (Circle One):                                   | Hydraulic System / Compressor / Gearbox |  |
| Other   |   |  |
|   |   |  |
| OIL BRAND & GRADE.  |   |  |
| SAMPLE DATE: MM/DD/                                       | YY                                      |  |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL   | OR COMPLETE THIS INFORMATION |  |
|---|------------------------------|--|
| COMPANY:  |                              |  |
| ADDRESS:  |                              |  |
| CITY:   | STATE/PROV:                  |  |
| ZIP/POSTAL:   | PHONE:                       |  |
| EMAIL/ATTN:   |                              |  |
| UNIT No.:   |                              |  |
| MAKE:   | MODEL:                       |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                              |  |
| Other   |                              |  |
|   |                              |  |
| SAMPLE DATE: MM / DD /  | YY                           |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                              |  |
| TIME ON OIL:  | CHANGED: YES / NO            |  |

TIME ON FILTER:

SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION  | NC    |
|--|-------|
| COMPANY:   |       |
| ADDRESS:   |       |
| CITY: STATE/PROV:  |       |
| ZIP/POSTAL: PHONE:   |       |
| EMAIL/ATTN:  |       |
| UNIT No.:  |       |
| MAKE: MODEL:   |       |
| COMPONENT (Circle One): Hydraulic System / Compressor / Ge | arbox |
| Other  |       |
| OIL BRAND & GRADE:   |       |
| SAMPLE DATE: MM/DD/YY                                      |       |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES             |       |
|  |       |

TIME ON OIL: \_\_\_\_\_

TIME ON FILTER: \_\_\_\_

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL   | OR COMPLETE THIS INFORMATION |  |
|---|------------------------------|--|
| COMPANY:  |                              |  |
| ADDRESS:  |                              |  |
|   | STATE/PROV:                  |  |
|   | PHONE:                       |  |
|   |                              |  |
| UNIT No.:   |                              |  |
| MAKE:   | _ MODEL:                     |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                              |  |
| Other   |                              |  |
|   |                              |  |
| SAMPLE DATE: MM / DD  |                              |  |
|   | LIBS / KILOMETERS / MILES    |  |

TIME ON OIL: CHANGED: YES / NO

TIME ON OIL:

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL OF  | COMPLETE THIS INFORMATION |  |
|---|---------------------------|--|
| COMPANY:  |                           |  |
| ADDRESS:  |                           |  |
| CITY:   | STATE/PROV:               |  |
| ZIP/POSTAL:   | PHONE:                    |  |
| EMAIL/ATTN:   |                           |  |
| UNIT No.:   |                           |  |
| MAKE:M  | ODEL:                     |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                           |  |
| Other   |                           |  |
| OIL BRAND & GRADE:  |                           |  |

SAMPLE DATE: MM / DD / YY

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |   |  |
|---|---|--|
| COMPANY:  |   |  |
| ADDRESS:  |   |  |
| CITY: STATE/PROV:   | _ |  |
| ZIP/POSTAL: PHONE:  | _ |  |
| EMAIL/ATTN:   | _ |  |
| UNIT No.:   | _ |  |
| MAKE: MODEL:  | _ |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |   |  |
| Other   | _ |  |
| OIL BRAND & GRADE:  |   |  |
| SAMPLE DATE: MM/DD/YY   | - |  |
|   |   |  |
|   |   |  |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL: \_\_\_\_

TIME ON FILTER: \_\_\_\_

CHANGED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL O   | R COMPLETE THIS INFORMATION |  |
|---|-----------------------------|--|
| COMPANY:  |                             |  |
| ADDRESS:  |                             |  |
| CITY:   | STATE/PROV:                 |  |
| ZIP/POSTAL:   | PHONE:                      |  |
| EMAIL/ATTN:   |                             |  |
| UNIT No.:   |                             |  |
|   | MODEL:                      |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                             |  |
| Other   |                             |  |
| OIL BRAND & GRADE:  |                             |  |
| SAMPLE DATE: MM / DD / Y  | <u>Y</u>                    |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                             |  |
| TIME ON OIL:  | CHANGED: YES / NO           |  |

TIME ON FILTER:

SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL C   | <b>DR</b> COMPLETE THIS INFORMATION     |
|---------------------------|---|
| COMPANY:                  |   |
| ADDRESS:                  |   |
|                           | STATE/PROV:                             |
|                           | PHONE:                                  |
| EMAIL/ATTN:               |   |
| UNIT No.:                 |   |
|                           | MODEL:                                  |
| COMPONENT (Circle One): H | lydraulic System / Compressor / Gearbox |
| Other                     |   |
| OIL BRAND & GRADE:        |   |
| SAMPLE DATE: MM/DD/       |   |
|                           |   |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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:







| ▼ AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION              |                        |  |
|---|------------------------|--|
| COMPANY:  |                        |  |
| ADDRESS:  |                        |  |
|   | STATE/PROV:            |  |
| ZIP/POSTAL:   | PHONE:                 |  |
| EMAIL/ATTN:   |                        |  |
| UNIT No.:   |                        |  |
| MAKE: M   | IODEL:                 |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                        |  |
| Other   |                        |  |
|   |                        |  |
| SAMPLE DATE: MM / DD / Y  |                        |  |
| TOTAL TIME ON UNIT: HOUR  | S / KILOMETERS / MILES |  |
|   |                        |  |

TIME ON OIL: \_\_\_\_

TIME ON FILTER:

SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:





Laboratory: WearCheck Canada Inc. C8-1175 Appleby Line Burlington, ON L7L 5H9 CANADA

### Ship To: CANADIAN BEARINGS LTD. (Branch 10) 1600 DREW ROAD MISSISSAUGA, ON L5S 1S5 CA L 5 S 1 S 5

# Carton Contents:



12 x Sample Bottles

- 12 x Sample Mailers
- 12 x Sample Information Forms (SIFs)
- SIF# CB0031714 to CB0031725

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





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





scan to track carton/samples

Customer:

Shipped:







| ▼ AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION |   |  |
|--|---|--|
| COMPANY:   |   |  |
| ADDRESS:   |   |  |
| CITY:  | STATE/PROV:                             |  |
| ZIP/POSTAL:  | PHONE:                                  |  |
| EMAIL/ATTN:  |   |  |
| UNIT No.:  |   |  |
|  | _MODEL:                                 |  |
| COMPONENT (Circle One):                            | Hydraulic System / Compressor / Gearbox |  |
| Other  |   |  |
|  |   |  |
|  |   |  |
| SAMPLE DATE: MM / DD /                             | YY                                      |  |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL: \_\_\_\_\_

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                                     |  |
|---|-------------------------------------|--|
| COMPANY:  |                                     |  |
| ADDRESS:  |                                     |  |
| CITY:   | STATE/PROV:                         |  |
| ZIP/POSTAL:   | PHONE:                              |  |
| EMAIL/ATTN:   |                                     |  |
| UNIT No.:   |                                     |  |
| MAKE: MOI   | DEL:                                |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                                     |  |
| COMPONENT (CIRCle One): Hydra                                   | aulic System / Compressor / Gearbox |  |
|   | , ,                                 |  |
| Other   |                                     |  |
| Other   |                                     |  |

TIME ON OIL: \_\_\_\_

TIME ON FILTER: \_\_\_\_\_

CHANGED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE

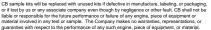


scan to track sample ID or S/N:

Sample Date:









| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                    |  |
|---|--------------------|--|
| COMPANY:  |                    |  |
| ADDRESS:  |                    |  |
| CITY:   | STATE/PROV:        |  |
| ZIP/POSTAL:   | PHONE:             |  |
|   |                    |  |
|   |                    |  |
|   | MODEL:             |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                    |  |
| Other   |                    |  |
| OIL BRAND & GRADE:  |                    |  |
| SAMPLE DATE:  |                    |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                    |  |
| TIME ON OIL:  | CHANGED: YES / NO  |  |
| TIME ON FILTER:   | SERVICED: YES / NO |  |
| Comments:   |                    |  |
|   |                    |  |

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL C  | R COMPLETE THIS INFORMATION            |
|--------------------------|--|
| COMPANY:                 |  |
| ADDRESS:                 |  |
| CITY:                    | STATE/PROV:                            |
|                          | PHONE:                                 |
|                          |  |
|                          |  |
|                          |  |
|                          | MODEL:                                 |
| . , ,                    | ydraulic System / Compressor / Gearbox |
| Other                    |  |
| OIL BRAND & GRADE:       |  |
| SAMPLE DATE: MM / DD / Y |  |
| TOTAL TIME ON UNIT: HOUR | RS / KILOMETERS / MILES                |
| TIME ON OIL:             | CHANGED: YES / NO                      |
| TIME ON FILTER:          | SERVICED: YES / NO                     |
| Comments:                |  |
|                          |  |
|                          |  |
|                          |  |
| Add Tests:               | 1000-216                               |

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |        |  |
|---|--------|--|
| COMPANY:  |        |  |
| ADDRESS:  |        |  |
| CITY:   |        |  |
| ZIP/POSTAL:   | PHONE: |  |
| EMAIL/ATTN:   |        |  |
| UNIT No.:   |        |  |
| MAKE: MODE  |        |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |        |  |
| Other   |        |  |
| OIL BRAND & GRADE:  |        |  |
| SAMPLE DATE: MM / DD / YY                                       |        |  |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL: \_\_\_\_\_

TIME ON FILTER:

CHANGED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                    |  |
|---|--------------------|--|
| COMPANY:  |                    |  |
| ADDRESS:  |                    |  |
| CITY:   | STATE/PROV:        |  |
| ZIP/POSTAL:   | PHONE:             |  |
| EMAIL/ATTN:   |                    |  |
| UNIT No.:   |                    |  |
| MAKE: MOI   | DEL:               |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                    |  |
| Other   |                    |  |
| OIL BRAND & GRADE:  |                    |  |
| SAMPLE DATE: MM / DD / YY                                       |                    |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                    |  |
| TIME ON OIL:  | CHANGED: YES / NO  |  |
| TIME ON FILTER:   | SERVICED: YES / NO |  |
| Comments:   |                    |  |

Add Tests:

CB0031719

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL OR CO    | MPLETE THIS INFORMATION           |
|--------------------------------|-----------------------------------|
| COMPANY:                       |                                   |
| ADDRESS:                       |                                   |
| CITY:                          |                                   |
| ZIP/POSTAL:                    | _ PHONE:                          |
| EMAIL/ATTN:                    |                                   |
| UNIT No.:                      |                                   |
| MAKE: MODI                     |                                   |
| COMPONENT (Circle One): Hydrau | lic System / Compressor / Gearbox |
| Other                          |                                   |
| OIL BRAND & GRADE:             |                                   |
|                                |                                   |

SAMPLE DATE: <u>MM / DD / YY</u>

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| AFFIX MACHINE LABEL OR CO  | MOLETE THE INFORMATION   |
|--|--|
|  | DWIFLETE THIS INFORMATION  |
| COMPANY:   |  |
| ADDRESS:   |  |
| CITY:  | _STATE/PROV:   |
| ZIP/POSTAL:  |  |
| EMAIL/ATTN:  |  |
| UNIT No.:  |  |
| MAKE: MODI   |  |
| COMPONENT (Circle One): Hydrau   |  |
| Other  |  |
|  |  |
| OIL BRAND & GRADE:   |  |
| SAMPLE DATE: <u>MM / DD / YY</u>   |  |
| TOTAL TIME ON UNIT: HOURS / P  |  |
| TIME ON OIL:   | CHANGED: YES / NO  |
| TIME ON FILTER:  | SERVICED: YES / NO   |
|  | SERVICED. FE3/ NO  |
| Comments:  | SERVICED. TES/NO   |
| Comments:  |  |
| Comments:  |  |
| Comments:  |  |
| Comments:<br>Add Tests:  |  |
| Add Tests:   |  |
| Add Tests:   | 1000-216   |
| Add Tests:<br>PLACE COMPLETED FORM IN M<br>KEEP FOR TRACKING THIS SAM                  | 1000-216<br>IAILER (DON`T STICK TO MAILER<br>IPLE ▼ STICK ON <b>BOTTLE</b> |
| Add Tests:<br>PLACE COMPLETED FORM IN M<br>KEEP FOR TRACKING THIS SAM<br>Scan to track | 1000-216<br>IAILER (DON`T STICK TO MAILER<br>IPLE ▼ STICK ON <b>BOTTLE</b> |
| Add Tests:<br>PLACE COMPLETED FORM IN M<br>KEEP FOR TRACKING THIS SAM                  | 1000-216<br>IAILER (DON`T STICK TO MAILER<br>IPLE ▼ STICK ON <b>BOTTLE</b> |

Sample Date:

e i

CB0031721

10.00







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                          |  |
|---|--------------------------|--|
| COMPANY:  |                          |  |
| ADDRESS:  |                          |  |
|   | STATE/PROV:              |  |
|   | PHONE:                   |  |
| EMAIL/ATTN:   |                          |  |
| UNIT No.:   |                          |  |
|   | MODEL:                   |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                          |  |
| Other   |                          |  |
|   |                          |  |
| SAMPLE DATE: MM / DD /  |                          |  |
| TOTAL TIME ON UNIT: HOU   | IRS / KILOMETERS / MILES |  |

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO TIME ON FILTER: SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                         |  |
|---|-------------------------|--|
| COMPANY:  |                         |  |
| ADDRESS:  |                         |  |
|   | STATE/PROV:             |  |
|   | PHONE:                  |  |
| EMAIL/ATTN:   |                         |  |
| UNIT No.:   |                         |  |
|   | MODEL:                  |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                         |  |
| Other   |                         |  |
|   |                         |  |
| SAMPLE DATE: MM / DD /  |                         |  |
| TOTAL TIME ON UNIT: HOU   | RS / KILOMETERS / MILES |  |

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO TIME ON FILTER: SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                    |  |
|---|--------------------|--|
| COMPANY:  |                    |  |
| ADDRESS:  |                    |  |
| CITY:   | _STATE/PROV:       |  |
| ZIP/POSTAL:   |                    |  |
| EMAIL/ATTN:   |                    |  |
| UNIT No.:   |                    |  |
| MAKE: MOD   | EL:                |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                    |  |
| Other   |                    |  |
| OIL BRAND & GRADE:  |                    |  |
| SAMPLE DATE:MM / DD / YY_                                       |                    |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                    |  |
| TIME ON OIL:  | CHANGED: YES / NO  |  |
| TIME ON FILTER:   | SERVICED: YES / NO |  |
| Comments:   |                    |  |
| 1   |                    |  |
|   |                    |  |

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL OI  | R COMPLETE THIS INFORMATION |  |
|---|-----------------------------|--|
| COMPANY:  |                             |  |
| ADDRESS:  |                             |  |
| CITY:   | STATE/PROV:                 |  |
|   | PHONE:                      |  |
|   |                             |  |
| UNIT No.:   |                             |  |
|   | IODEL:                      |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                             |  |
| Other   |                             |  |
| OIL BRAND & GRADE:  |                             |  |
| SAMPLE DATE: MM / DD / Y  | Y                           |  |
| TOTAL TIME ON UNIT: HOUR  | S / KILOMETERS / MILES      |  |
| TIME ON OIL:  | CHANGED: YES / NO           |  |

TIME ON FILTER: \_\_\_\_

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:



STICK ON BOTTLE

SERVICED: YES / NO



Laboratory: WearCheck Canada Inc. C8-1175 Appleby Line Burlington, ON L7L 5H9 CANADA

### Ship To: CANADIAN BEARINGS LTD. (Branch 10) 1600 DREW ROAD MISSISSAUGA, ON L5S 1S5 CA 158185

# Carton Contents:



12 x Sample Bottles

- 12 x Sample Mailers
- 12 x Sample Information Forms (SIFs)
- SIF# CB0031726 to CB0031737



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





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





scan to track carton/samples

Customer:

Shipped:







TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL   | OR COMPLETE THIS INFORMATION            |
|-------------------------|---|
| COMPANY:                |   |
| ADDRESS:                |   |
| CITY:                   | STATE/PROV:                             |
| ZIP/POSTAL:             | PHONE:                                  |
| EMAIL/ATTN:             |   |
| UNIT No.:               |   |
| MAKE:                   | _ MODEL:                                |
| COMPONENT (Circle One): | Hydraulic System / Compressor / Gearbox |
| Other                   |   |
|                         |   |

OIL BRAND & GRADE: \_

SAMPLE DATE: MM / DD / YY

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION |   |
|---|---|
| COMPANY:  |   |
| ADDRESS:  |   |
|   | STATE/PROV:                             |
|   | PHONE:                                  |
| EMAIL/ATTN:   |   |
| UNIT No.:   |   |
|   | _MODEL:                                 |
| COMPONENT (Circle One):                                   | Hydraulic System / Compressor / Gearbox |
| Other   |   |
|   |   |
|   |   |
| SAMPLE DATE: MM/DD/                                       | YY                                      |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                   |  |
|---|-------------------|--|
| COMPANY:  |                   |  |
| ADDRESS:  |                   |  |
| CITY:   | STATE/PROV:       |  |
| ZIP/POSTAL:   | PHONE:            |  |
|   |                   |  |
| UNIT No.:   |                   |  |
|   | NODEL:            |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                   |  |
| Other   |                   |  |
| OIL BRAND & GRADE:  |                   |  |
| SAMPLE DATE:MM / DD / YY  |                   |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                   |  |
| TIME ON OIL:  | CHANGED: YES / NO |  |

TIME ON FILTER: \_\_\_\_

SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION       |                    |  |
|---|--------------------|--|
| COMPANY:  |                    |  |
| ADDRESS:  |                    |  |
| CITY: STAT  | E/PROV:            |  |
| ZIP/POSTAL: PHON  | NE:                |  |
| EMAIL/ATTN:   |                    |  |
| UNIT No.:   |                    |  |
| MAKE: MODEL:  |                    |  |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                    |  |
| Other   |                    |  |
| OIL BRAND & GRADE:  |                    |  |
| SAMPLE DATE: MM / DD / YY                                       |                    |  |
| TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES                  |                    |  |
| TIME ON OIL:  | CHANGED: YES / NO  |  |
| TIME ON FILTER:   | SERVICED: YES / NO |  |
|   |                    |  |

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL OR    | COMPLETE THIS INFORMATION            |  |
|-----------------------------|--------------------------------------|--|
| COMPANY:                    |                                      |  |
| ADDRESS:                    |                                      |  |
|                             | STATE/PROV:                          |  |
| ZIP/POSTAL:                 | PHONE:                               |  |
| EMAIL/ATTN:                 |                                      |  |
| UNIT No.:                   |                                      |  |
|                             | DDEL:                                |  |
| COMPONENT (Circle One): Hyd | raulic System / Compressor / Gearbox |  |
| Other                       |                                      |  |
| OIL BRAND & GRADE:          |                                      |  |
| SAMPLE DATE: MM/DD/YY       |                                      |  |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL: \_\_\_\_\_

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION |   |
|---|---|
| COMPANY:  |   |
| ADDRESS:  |   |
|   | STATE/PROV:                             |
|   | PHONE:                                  |
| EMAIL/ATTN:   |   |
| UNIT No.:   |   |
|   | MODEL:                                  |
| COMPONENT (Circle One):                                   | Hydraulic System / Compressor / Gearbox |
| Other   |   |
|   |   |
|   |   |
| SAMPLE DATE: MM / DD /                                    | <u>Y Y</u>                              |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL: \_\_\_\_\_

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL <b>OR</b> COMPLETE THIS INFORMATION |  |
|---|--|
| COMPANY:  |  |
| ADDRESS:  |  |
| CITY:   | STATE/PROV:                            |
| ZIP/POSTAL:   | PHONE:                                 |
| EMAIL/ATTN:   |  |
| UNIT No.:   |  |
| MAKE: I   | MODEL:                                 |
| COMPONENT (Circle One): H                                 | ydraulic System / Compressor / Gearbox |
| Other   |  |
| OIL BRAND & GRADE:  |  |
|   |  |

SAMPLE DATE: MM / DD / YY

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE

scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE LABEL OR CO<br>COMPANY:                         |                    |
|---|--------------------|
| ADDRESS:  |                    |
| CITY:   |                    |
| ZIP/POSTAL:   | _ PHONE:           |
| EMAIL/ATTN:   |                    |
| UNIT No.:   |                    |
| MAKE: MOD   | EL:                |
| COMPONENT (Circle One): Hydraulic System / Compressor / Gearbox |                    |
| Other   |                    |
| OIL BRAND & GRADE:  |                    |
| SAMPLE DATE: MM / DD / YY                                       |                    |
| TOTAL TIME ON UNIT: HOURS / I                                   | KILOMETERS / MILES |
| TIME ON OIL:  | CHANGED: YES / NO  |
| TIME ON FILTER:   | SERVICED: YES / NO |
| Comments:   |                    |
|   |                    |

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:







| ▼ AFFIX MACHINE  | LABEL OR COMPLETE THIS INFORMATION              |
|------------------|---|
| COMPANY:         |   |
| ADDRESS:         |   |
|                  | STATE/PROV:                                     |
| ZIP/POSTAL:      | PHONE:  |
| EMAIL/ATTN:      |   |
| UNIT No.:        |   |
|                  | MODEL:  |
| COMPONENT (Circl | e One): Hydraulic System / Compressor / Gearbox |
| Other            | <u> </u>  |
|                  | DE:   |
|                  |   |
| SAMPLE DATE:M    | M / DD / YY                                     |
|                  |   |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL: \_\_\_\_

TIME ON FILTER: \_\_\_\_

CHANGED: YES / NO

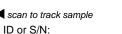
Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE





Sample Date:







| ▼ AFFIX MACHINE LABEL C   | OR COMPLETE THIS INFORMATION            |
|---------------------------|---|
| COMPANY:                  |   |
| ADDRESS:                  |   |
| CITY:                     | STATE/PROV:                             |
| ZIP/POSTAL:               | PHONE:                                  |
| EMAIL/ATTN:               |   |
| UNIT No.:                 |   |
|                           | MODEL:                                  |
| COMPONENT (Circle One): H | lydraulic System / Compressor / Gearbox |
| Other                     |   |
| OIL BRAND & GRADE:        |   |

SAMPLE DATE: MM / DD / YY

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER: \_\_\_\_

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:





CB0031737

CB sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or sup associate company even though by negligence or other fault. CB shall not be labels 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.

| ▼ AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION |   |  |
|--|---|--|
| COMPANY:   |   |  |
| ADDRESS:   |   |  |
|  | STATE/PROV:                             |  |
|  | PHONE:                                  |  |
| EMAIL/ATTN:  |   |  |
| UNIT No.:  |   |  |
|  | MODEL:                                  |  |
| COMPONENT (Circle One): I                          | Hydraulic System / Compressor / Gearbox |  |
| Other  |   |  |
| OIL BRAND & GRADE:                                 |   |  |
| SAMPLE DATE:                                       |   |  |

TOTAL TIME ON UNIT: HOURS / KILOMETERS / MILES

TIME ON OIL:

TIME ON FILTER:

CHANGED: YES / NO SERVICED: YES / NO

Comments:

Add Tests:

1000-216

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

**KEEP** FOR TRACKING THIS SAMPLE



scan to track sample ID or S/N:

Sample Date:

