



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

Ship To:

PETRO-CANADA - LYLE HOFFMAN
91 WEST 220 SOUTH
BOUNTIFUL, UT 84010
UM

8 4 0 1 0

Carton Contents:



10 x Sample Bottles
10 x Sample Mailers
10 x Sample Information Forms (SIFs)
SIF# PCA0128292 to PCA0128301



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



CARTON ID
251718

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

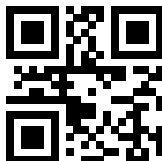


← scan to track carton/samples

Customer: _____

Shipped: _____

ID# 251718



ID# 251718



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128292

PCA 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. PCA 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.

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From: Final Drive Transmission

Diesel Engine Differential New (Unused) Oil

Natural Gas Engine Gearbox Pump Drive

Engine (fuel _____) Swing Drive Axle

Hydraulic System Tandem 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: _____ 1000-059

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

▼ **KEEP FOR TRACKING THIS SAMPLE**

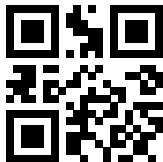
▼ **STICK ON BOTTLE**



◀ scan to track sample
ID or S/N:

Sample Date:

PCA0128292



PCA0128292



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128293

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

▲ 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:

PCA0128293



PCA0128293



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128294

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

▲ 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:

PCA0128294



PCA0128294



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128295

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

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

▼ **KEEP FOR TRACKING THIS SAMPLE**

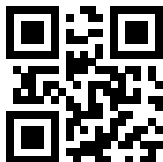
▼ **STICK ON BOTTLE**



◀ scan to track sample
ID or S/N:

Sample Date:

PCA0128295



PCA0128295



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128296

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

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

▼ **KEEP FOR TRACKING THIS SAMPLE**

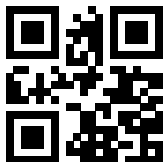
▼ **STICK ON BOTTLE**



PCA0128296

◀ scan to track sample
ID or S/N:

Sample Date:



PCA0128296



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128297

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

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

▼ **KEEP FOR TRACKING THIS SAMPLE**

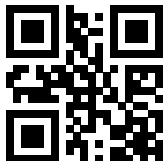
▼ **STICK ON BOTTLE**



◀ scan to track sample
ID or S/N:

Sample Date:

PCA0128297



PCA0128297



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128298

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

▲ 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:

PCA0128298



PCA0128298



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128299

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

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

▼ **KEEP FOR TRACKING THIS SAMPLE**

▼ **STICK ON BOTTLE**

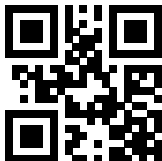


◀ scan to track sample

ID or S/N:

Sample Date:

PCA0128299



PCA0128299



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128300

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

▲ 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:

PCA0128300



PCA0128300



LUBE 360™ OIL DIAGNOSTICS

SCAN TO COMPLETE **ON-LINE** ▶



PCA0128301

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

DISTRIBUTOR: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL: _____ PHONE: _____

EMAIL/ATTN: _____

UNIT No.: _____ Serial No.: _____

MAKE: _____ MODEL: _____

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<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: _____ 1000-059

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

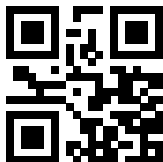
▼ **STICK ON BOTTLE**



◀ scan to track sample
ID or S/N:

Sample Date:

PCA0128301



PCA0128301