



**Energetics
Compressed Air**

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

Ship To:

EMS INDUSTRIAL
2229 BELOIT AVE
JANESVILLE, WI 53546
US

.....
5 3 5 4 6

Carton Contents:



10 x Sample Bottles
10 x Sample Mailers
10 x Sample Information Forms (SIFs)
SIF# UEM0000001 to UEM0000010



U E M - I N D - 2

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



CARTON ID
256710

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

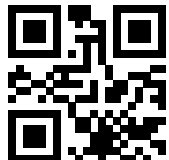


← scan to track carton/samples

Customer:

Shipped:

ID# 256710



ID# 256710



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000001

Davis

UEM 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. UEM 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**

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Other _____
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox

FILTER RATING: _____ µm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



UEM0000001

◀ scan to track sample
ID or S/N:

Sample Date:



UEM0000001



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000002

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Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

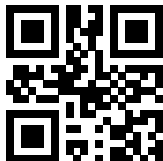
▼ STICK ON **BOTTLE**



◀ scan to track sample
ID or S/N:

Sample Date:

UEM0000002



UEM0000002



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000003

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**

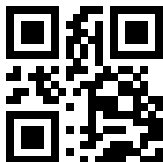


UEM0000003

◀ scan to track sample

ID or S/N:

Sample Date:



UEM0000003



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000004

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:

UEM0000004



UEM0000004



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ►



UEM0000005

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ µm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

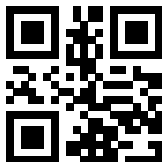
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



UEM0000005

◀ scan to track sample
ID or S/N:

Sample Date:



UEM0000005



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000006

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

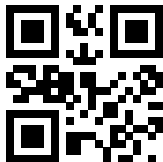
▼ STICK ON **BOTTLE**



UEM0000006

◀ scan to track sample
ID or S/N:

Sample Date:



UEM0000006



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000007

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:



UEM0000007

UEM0000007



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ►



UEM0000008

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ µm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

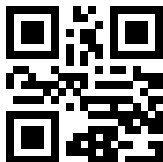
▼ STICK ON **BOTTLE**



◀ scan to track sample
ID or S/N:

Sample Date:

UEM0000008



UEM0000008



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000009

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



UEM0000009

◀ scan to track sample
ID or S/N:

Sample Date:



UEM0000009



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000010

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**

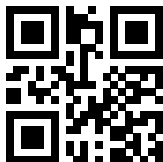


UEM0000010

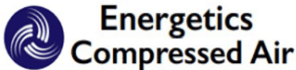
◀ scan to track sample

ID or S/N:

Sample Date:



UEM0000010



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

Ship To:
EMS INDUSTRIAL
2229 BELOIT AVE
JANESVILLE, WI 53546
US

5 3 5 4 6

Carton Contents:



10 x Sample Bottles
10 x Sample Mailers
10 x Sample Information Forms (SIFs)
SIF# UEM0000011 to UEM0000020



U E M - I N D - 2

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



CARTON ID
256711

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



← scan to track carton/samples

Customer:

Shipped:

ID# 256711



ID# 256711



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000011

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From: Refrigeration Comp. Rotary Compressor

Screw Compressor Reciprocating Comp. Hydraulic System

Circulating System Gearbox Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:

UEM0000011



UEM0000011



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000012

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

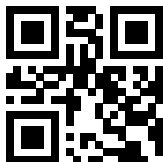
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



◀ scan to track sample
ID or S/N:

Sample Date:

UEM0000012



UEM0000012



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000013

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:

UEM0000013



UEM0000013



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000014

Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:

UEM0000014



UEM0000014



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



UEM0000015

Davis

UEM 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. UEM 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**

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



UEM0000015

◀ scan to track sample
ID or S/N:

Sample Date:



UEM0000015



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



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Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:

UEM0000016



UEM0000016



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Compressed Air**

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

Refrigeration Comp. Rotary Compressor

Screw Compressor Reciprocating Comp. Hydraulic System

Circulating System Gearbox Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

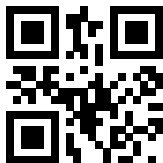
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



UEM0000017

◀ scan to track sample
ID or S/N:

Sample Date:



UEM0000017



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Compressed Air**

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

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

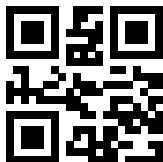
▼ **KEEP** FOR TRACKING THIS SAMPLE ▼ STICK ON **BOTTLE**



UEM0000018

◀ scan to track sample
ID or S/N:

Sample Date:



UEM0000018



**Energetics
Compressed Air**

SCAN TO COMPLETE **ON-LINE** ▶



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Davis

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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ μm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:

UEM0000019



UEM0000019



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Compressed Air**

SCAN TO COMPLETE **ON-LINE** ►



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

CUSTOMER CODE: _____ **OR**

CUSTOMER: _____

ADDRESS: _____

CITY: _____ STATE/PROV: _____

ZIP/POSTAL CODE: _____ ATTN: _____

UNIT ID: _____ S/N: _____

MAKE / MODEL: _____

Sample From:

<input type="checkbox"/> Refrigeration Comp.	<input type="checkbox"/> Rotary Compressor
<input type="checkbox"/> Screw Compressor	<input type="checkbox"/> Reciprocating Comp.
<input type="checkbox"/> Circulating System	<input type="checkbox"/> Gearbox
	<input type="checkbox"/> Hydraulic System
	<input type="checkbox"/> Other _____

FILTER RATING: _____ µm ISO TARGET CODE: _____

OIL BRAND & GRADE: _____

SAMPLE DATE: MM/DD/YY CAPACITY: _____ L / Gal

TOTAL TIME ON UNIT: _____ hrs / days / mths / yrs

TIME ON OIL: _____ CHANGED: YES / NO / FILTERED

TIME ON FILTER: _____ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: _____ 1000-250

▲ 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:

UEM0000020



UEM0000020