

LUBRICANTS.  
TECHNOLOGY.  
PEOPLE.



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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

.....  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles

10 x Sample Mailers



10 x Sample Information Forms (SIFs)

SIF# FCH0000107 to FCH0000116



F C H - P L A N T

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



CARTON ID

257053

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

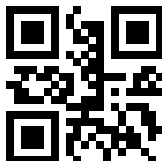


← scan to track carton/samples

Customer:

Shipped:

ID# 257053



ID# 257053



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000107**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

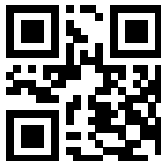
▼ **KEEP FOR TRACKING THIS SAMPLE**      ▼ **STICK ON BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000107**



**FCH0000107**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000108**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

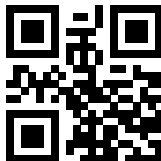
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000108**



**FCH0000108**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000109**

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WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

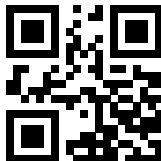
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000109**



**FCH0000109**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

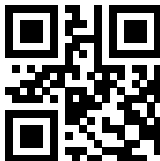
▼ **STICK ON BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000110**



**FCH0000110**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

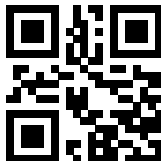
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000111**



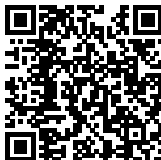
**FCH0000111**



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**FCH0000112**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

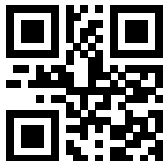
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

**FCH0000112**



**FCH0000112**



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**FCH0000113**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000113**



**FCH0000113**





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**FCH0000114**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

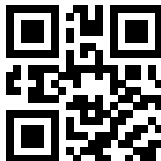
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000114**



**FCH0000114**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000115**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000115**



**FCH0000115**



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**FCH0000116**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

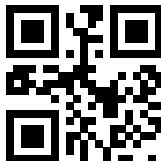
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000116**



**FCH0000116**

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PEOPLE.



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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles  
10 x Sample Mailers  
10 x Sample Information Forms (SIFs)  
SIF# FCH0000117 to FCH0000126



F C H - P L A N T

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



**CARTON ID**  
**257054**

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



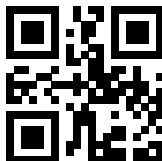
← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



**ID# 257054**

**ID# 257054**



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PEOPLE.**



SCAN TO COMPLETE **ON-LINE** ►



**FCH0000117**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000117**



**FCH0000117**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000118**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

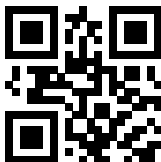
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000118**



**FCH0000118**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000119**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

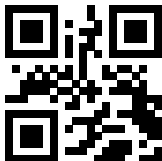
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000119**



**FCH0000119**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000120**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

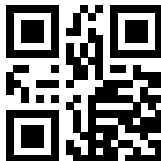
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000120**



**FCH0000120**





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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000121**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000121**



**FCH0000121**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000122**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000122**



**FCH0000122**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000123**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

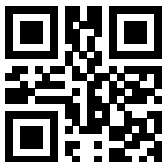
▼ **KEEP FOR TRACKING THIS SAMPLE**      ▼ **STICK ON BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000123**



**FCH0000123**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000124**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

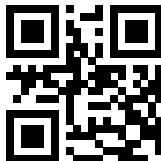
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000124**



**FCH0000124**



**LUBRICANTS.  
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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000125**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

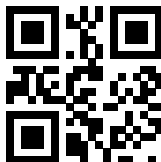
▼ **KEEP FOR TRACKING THIS SAMPLE**      ▼ **STICK ON BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000125**



**FCH0000125**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000126**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000126**



**FCH0000126**

LUBRICANTS.  
TECHNOLOGY.  
PEOPLE.



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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles

10 x Sample Mailers



10 x Sample Information Forms (SIFs)

SIF# FCH0000127 to FCH0000136



F C H - P L A N T

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



CARTON ID

257055

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



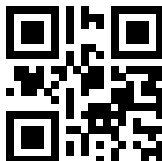
← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



ID# 257055

ID# 257055



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000127**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

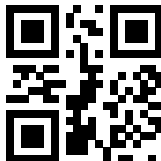
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000127**



**FCH0000127**





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**FCH0000128**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

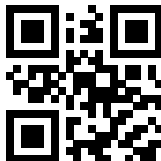
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000128**



**FCH0000128**



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**FCH0000129**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000129**



**FCH0000129**



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**FCH0000130**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

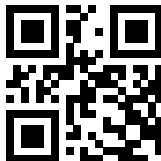
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000130**



**FCH0000130**



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**FCH0000131**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

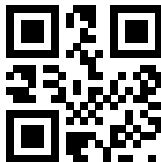
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

**FCH0000131**



**FCH0000131**



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**FCH0000132**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

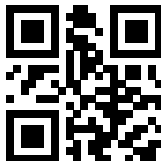
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000132**



**FCH0000132**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000133**



**FCH0000133**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000134**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

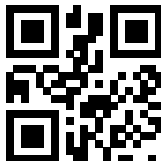
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000134**



**FCH0000134**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000135**



**FCH0000135**





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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

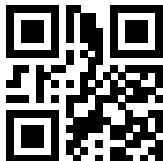
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000136**



**FCH0000136**

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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles  
10 x Sample Mailers  
10 x Sample Information Forms (SIFs)  
SIF# FCH0000137 to FCH0000146



F C H - P L A N T

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



**CARTON ID**  
**257056**

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



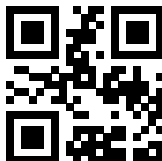
← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



**ID# 257056**

**ID# 257056**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000137**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

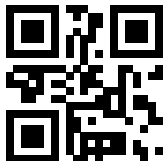
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000137**



**FCH0000137**



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**FCH0000138**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

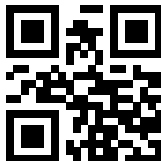
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000138**



**FCH0000138**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

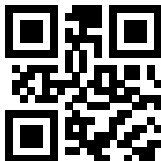
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000139**



**FCH0000139**



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**FCH0000140**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

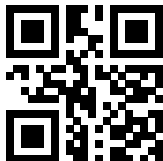
▼ **KEEP FOR TRACKING THIS SAMPLE**      ▼ **STICK ON BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000140**



**FCH0000140**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

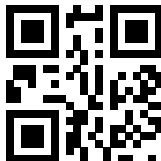
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000141**



**FCH0000141**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

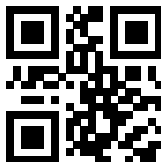
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000142**



**FCH0000142**





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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

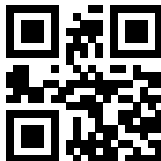
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000143**



**FCH0000143**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

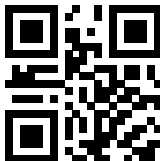
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000144**



**FCH0000144**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

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



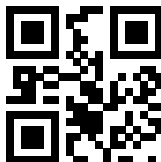
◀ scan to track sample  
ID or S/N:

\_\_\_\_\_

Sample Date:

\_\_\_\_\_

**FCH0000145**



**FCH0000145**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

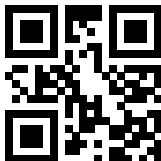
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000146**



**FCH0000146**

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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles

10 x Sample Mailers



10 x Sample Information Forms (SIFs)

SIF# FCH0000147 to FCH0000156



F C H - P L A N T

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



**CARTON ID**  
**257057**

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



← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



**ID# 257057**

**ID# 257057**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000147**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

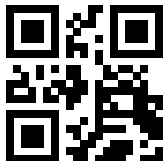
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

**FCH0000147**



**FCH0000147**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000148**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

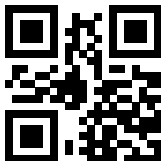
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000148**



**FCH0000148**



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**FCH0000149**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

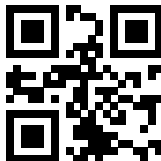
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000149**



**FCH0000149**





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**FCH0000150**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

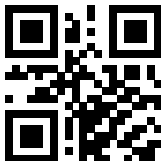
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000150**



**FCH0000150**



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**FCH0000151**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000151**



**FCH0000151**



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**FCH0000152**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

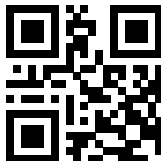
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000152**



**FCH0000152**



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**FCH0000153**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

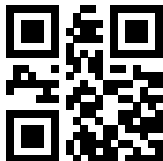
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000153**



**FCH0000153**



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**FCH0000154**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

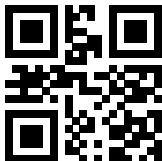
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000154**



**FCH0000154**



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**FCH0000155**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

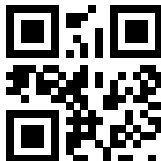
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

**FCH0000155**



**FCH0000155**



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**FCH0000156**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

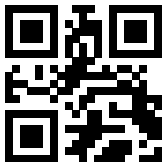
▼ **KEEP FOR TRACKING THIS SAMPLE**      ▼ **STICK ON BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000156**



**FCH0000156**

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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles

10 x Sample Mailers



10 x Sample Information Forms (SIFs)

SIF# FCH0000157 to FCH0000166



F C H - P L A N T

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



CARTON ID

257058

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



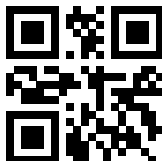
← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



ID# 257058

ID# 257058





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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000157**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

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



**FCH0000157**

◀ scan to track sample  
ID or S/N:

Sample Date:



**FCH0000157**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000158**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

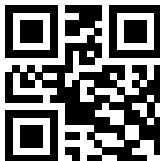
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000158**



**FCH0000158**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000159**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

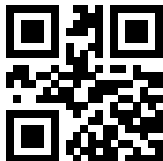
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000159**



**FCH0000159**



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**FCH0000160**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

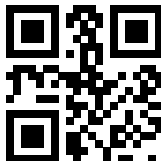
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



← scan to track sample  
ID or S/N:

Sample Date:

**FCH0000160**



**FCH0000160**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000161**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000161**



**FCH0000161**



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**FCH0000162**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

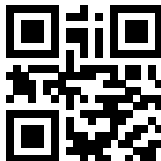
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000162**



**FCH0000162**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000163**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

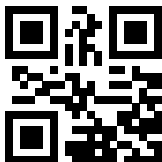
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000163**



**FCH0000163**



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**FCH0000164**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000164**



**FCH0000164**





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**FCH0000165**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

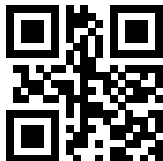
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

**FCH0000165**



**FCH0000165**



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**FCH0000166**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

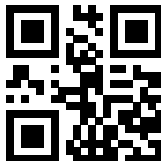
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000166**



**FCH0000166**

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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles

10 x Sample Mailers



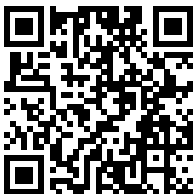
10 x Sample Information Forms (SIFs)

SIF# FCH0000167 to FCH0000176



F C H - P L A N T

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



CARTON ID

257059

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



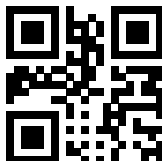
← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



ID# 257059

ID# 257059



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TECHNOLOGY.  
PEOPLE.**



SCAN TO COMPLETE **ON-LINE** ►



**FCH0000167**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

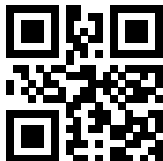
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000167**



**FCH0000167**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000168**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000168**



**FCH0000168**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000169**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000169**



**FCH0000169**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000170**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:  
\_\_\_\_\_

**FCH0000170**



**FCH0000170**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000171**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

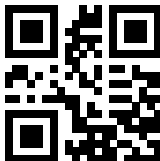
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000171**



**FCH0000171**





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**FCH0000172**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000172**



**FCH0000172**



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**FCH0000173**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

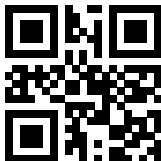
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000173**



**FCH0000173**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000174**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

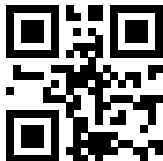
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000174**



**FCH0000174**



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**FCH0000175**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

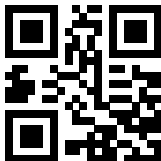
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000175**



**FCH0000175**



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**FCH0000176**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

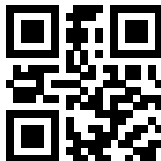
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000176**



**FCH0000176**

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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles  
10 x Sample Mailers  
10 x Sample Information Forms (SIFs)  
SIF# FCH0000177 to FCH0000186



F C H - P L A N T

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



**CARTON ID**  
**257060**

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



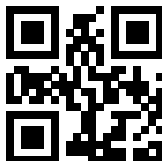
← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



**ID# 257060**

**ID# 257060**



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SCAN TO COMPLETE **ON-LINE** ►



**FCH0000177**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

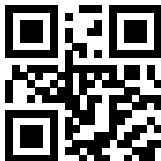
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000177**



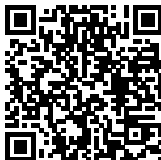
**FCH0000177**



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**FCH0000178**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000178**



**FCH0000178**





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**FCH0000179**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000179**



**FCH0000179**



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**FCH0000180**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000180**



**FCH0000180**



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**FCH0000181**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

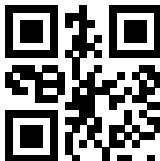
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

**FCH0000181**



**FCH0000181**



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**FCH0000182**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

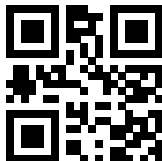
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000182**



**FCH0000182**



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**FCH0000183**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

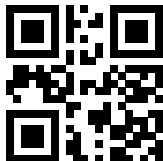
▼ **KEEP FOR TRACKING THIS SAMPLE**      ▼ **STICK ON BOTTLE**



← scan to track sample  
ID or S/N:  
\_\_\_\_\_

Sample Date:  
\_\_\_\_\_

**FCH0000183**



**FCH0000183**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

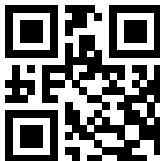
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000184**



**FCH0000184**



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**FCH0000185**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

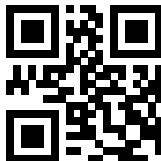
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000185**



**FCH0000185**



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**FCH0000186**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

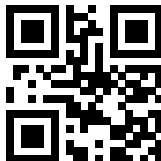
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000186**



**FCH0000186**



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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles

10 x Sample Mailers



10 x Sample Information Forms (SIFs)

SIF# FCH0000187 to FCH0000196



F C H - P L A N T

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



**CARTON ID**  
**257061**

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



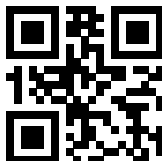
← scan to track carton/samples

Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_



**ID# 257061**

**ID# 257061**



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**FCH0000187**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

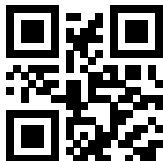
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



**FCH0000187**

◀ scan to track sample  
ID or S/N:

Sample Date:



**FCH0000187**



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**FCH0000188**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

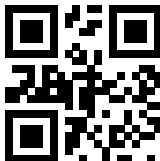
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000188**



**FCH0000188**



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**FCH0000189**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

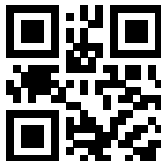
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000189**



**FCH0000189**



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**FCH0000190**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000190**



**FCH0000190**



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**FCH0000191**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

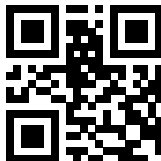
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000191**



**FCH0000191**



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**FCH0000192**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

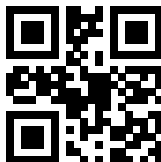
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000192**



**FCH0000192**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

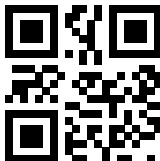
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000193**



**FCH0000193**





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**FCH0000194**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

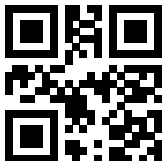
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000194**



**FCH0000194**



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**FCH0000195**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

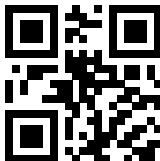
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000195**



**FCH0000195**



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**FCH0000196**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

▲ 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:

**FCH0000196**



**FCH0000196**

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

### Ship To:

DANA - FAIRFIELD CUSTOM GEARS AND DRIVES  
2400 SAGAMORE PKWY S #2400  
LAFAYETTE, IN 47905  
US

-----  
4 7 9 0 5

### Carton Contents:



10 x Sample Bottles

10 x Sample Mailers



10 x Sample Information Forms (SIFs)

SIF# FCH0000197 to FCH0000206



F C H - P L A N T

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



**CARTON ID**  
**257062**

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

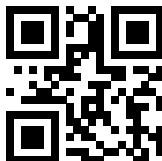


← scan to track carton/samples

Customer:

Shipped:

ID# 257062



ID# 257062



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**FCH0000197**

FCH 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. FCH 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: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

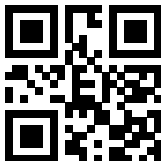
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

\_\_\_\_\_  
Sample Date:

**FCH0000197**



**FCH0000197**



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**FCH0000198**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

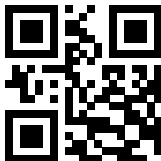
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000198**



**FCH0000198**



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**FCH0000199**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

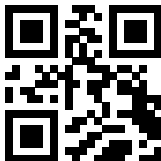
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000199**



**FCH0000199**



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**FCH0000200**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

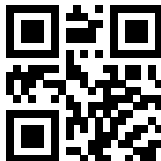
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000200**



**FCH0000200**





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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

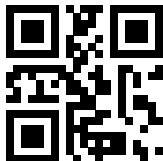
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



**FCH0000201**

◀ scan to track sample  
ID or S/N:

Sample Date:



**FCH0000201**



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**FCH0000202**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

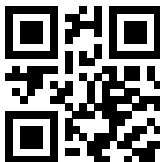
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000202**



**FCH0000202**



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**FCH0000203**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| <i>Sample From:</i>                       | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

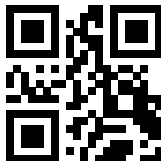
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000203**



**FCH0000203**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- |   |  |   |
|---|--|---|
| Sample From:                              | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

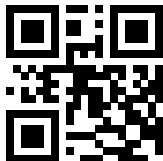
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



**FCH0000204**

◀ scan to track sample  
ID or S/N:

Sample Date:



**FCH0000204**



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**FCH0000205**

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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

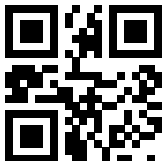
▼ **KEEP FOR TRACKING THIS SAMPLE**      ▼ **STICK ON BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000205**



**FCH0000205**



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**CUSTOMER CODE: UCDANLAF**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

MAKE / MODEL: \_\_\_\_\_

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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: \_\_\_\_\_ 1000-200

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

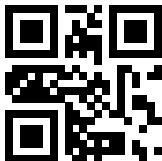
▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**FCH0000206**



**FCH0000206**