

Midwest Laboratories, Inc. 13611 B Street, Omaha, NE 68144 402-334-7770

ETHANOL SAMPLE SUBMITTAL FORM

Account Number/ Company Name:	Purchase Order:				
REPORT & BILL TO	IDENT	IDENTIFICATION		СОРУТО	
Name: Client Name:			Name:		
Address:				Address:	
City/State: ZIP:	Sample Date:	Sample Date:		ZIP:	
Phone: FAX:	Sample Time:		City/State: ZIP: Email:		
Email:			56/03/5064058745		
SAMPLE ID	ASTM 4806	DENATURANT TEST	ING	ASTM 5798 E-85	
	COMMENTS	(OTHER ANALYSIS)			
MIDWEST LABORATORIES - LAB USE ONLY		MIDWEST LABORATORIES - RECEIVING USE ONLY			
Temperature on Arrival:		Date/ Time:			
		Received By:			
No. of Containers:					