

| C           | atalog #   |  |  |                                |   |                         |
|-------------|--|--|--|--------------------------------|---|-------------------------|
| Lo          | ot/Serial #  |  |  |                                |   |                         |
| (RI)<br>nfc | health, safety, and envious AA) or Service (SRV) nuormation requested below terials. Please complete                   | mber indicated below w, you are helping us | prior to authori<br>prevent Restek   | zing the physic                | al return of a product  | . By providing the      |
|             | DO NOT send products not exposed to any of the   |  |  |                                | s. Restek cannot serv   | vice these products.    |
|             | (Restek can resolve product p  | performance issues withou                  | t having you physic  | cally return product           | s that have been exposed  | to these materials.)    |
|             | <ul><li>Dioxins</li><li>Explosives</li><li>Mercury</li><li>Cadmium</li></ul>   | ∙ Radiat<br>• Humai                        | <ul><li>Polybrominated Bipheny</li><li>Radiation</li><li>Human or Animal Tissue or Pathogens</li></ul> |                                | <ul><li>Lead</li><li>Hexavalent Chromium</li><li>Polybrominated Diphenyl Ethers (PBDEs)</li></ul> |                         |
| В.          | Was the product used?  | No Yes If                                  | no, please proc  | eed to Section E               | . If yes, please provide  | e a description of use: |
| C           | Please identify the mater  | rials to which this produ                  | urt has been evi   | oosed (Check a                 | Il that annly )   |                         |
| О.          | <ul> <li>Please identify the materials to which this product has</li> <li>Volatile Organic Compounds (VOCs)</li> </ul> |  |  | Controlled Substances or Drugs |   |                         |
|             | Semivolatiles  |  |  | Other (please specify):        |   |                         |
|             | Pesticides   |  |  | Other (please specify):        |   |                         |
|             | Hydrocarbons   |  |  |                                | , ,,  |                         |
| D.          | Was any attempt made to remove the materials indicated above? If yes, please list specifically what was done.          |  |  |                                |   |                         |
| E.          | By my signature, I am ce not contain, nor was in co  |  |  |                                | te and accurate and th  | nat this product does   |
|             | ,  | , , , , ,                                  |  |                                |   |                         |
|             | Name (printed)   |  | Signature  | Signature                      |   | Date                    |
| _           |  |  |  |                                |   |                         |
|             | or Restek Use Only:  | PMA)                                       | e.   | ervice Authoriza               | tion No. (SP\/)   |                         |
| ικ          | eturn Authorization No. (R   | (MICA)                                     |  | er vice AutilUliZa             | uon No. (SNV)   |                         |

Doc# 363-1774 v4 www.restek.com