



## Sample Shipment Tracking Form

Company Name:	
Address:	Sampling Address:
Contact Name:	Contact Name:
Telephone:	Telephone:
Fax:	Fax:
E-Mail:	E-mail:

Product Name:
Date samples shipped:
Shipping company used:
Estimated delivery date:
Shipment tracking number:

### Applicant Authorization:

Controller Signature:	Printed Name:	Date:
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### Submit this completed Sample Shipment Tracking Form to:

SGS Consumer Testing Services, c/o QAI Laboratories, 1325 North 108 East Avenue, Tulsa, OK 74116 Attn. Linda Lewis Phone: (918) 437-8333 Ext. 322 Fax: (918) 437-8487 eMail: LLewis@QAI.org
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<b>SGS USE ONLY</b>	<b>DATE STAMP:</b>
Comments:	