Agricultural Laboratory 2004 Research Park Cir. Manhattan, KS 66502



Phone: 785-296-7020 Fax: 785-862-0727 www.agriculture.ks.gov

Mike Beam, Secretary

Laura Kelly, Governor

## Kansas Metrology Laboratory Customer Submission Form

This form m	ay be brou	ight / s	shipped in with scl	neduled ite	ms or en	nailed to : kda.r	netro	logy@ks.gov	Date
Company  Mailing (if different than physical)			pany Name						
		Physical Address							
		City, State Zip Code							
		Contact Person							
		Phone Number							
		Email							
			al Address						
		City, State Zip Code							
		Company Name							
Billing (if billed to a different location)		Billing Address							
		City, State Zip Code							
		Contact Person							
		Phone Number							
		Email							
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Shipping	Method	use	shipping account	use retu	rn shipm	ent label includ	ied	lab ships (excludes freight	, cnarged to invoice)
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	"use ship								
	account" has		Account Numbe						
been sel		_	Insurance Amou	nt, if any					
Purchase On	_								
	Certification Period (if required,								
Certificate		Assigned to (if you want a sta							
		are specifically assigned (e.g. Truck 1, Quality Control))							
	Addition				, to deter	mine applicable	e cali	bration procedures and toler	ances.
Quantity			Nominal Mass (if standards			Jumber (if auar	ntity (	of a certain nominal mass is	<= 10 or item is a
	Class		set enter the nominal mass		Serial Number (if quantity of a certain nominal mass is <= 10 or item is a standards set)				
		range the set cove		s)	Staridar	45 500)			
	<- Total								
Notes									
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