

SUBMISSION FOR PROCESSING WORK [1/2]

CFM REQUISITION NUMBER		
CLIENT INFORMATION	INVOICE SENT TO	
Company:	Company:	
Submitted by:	Attention:	
Address:	Address:	
Phone: Fax:	Phone: Fax:	
E-mail:	E-mail:	
SAMPLES SUBMITTED		
Client WO#:	Client PO#:	Client REF#:
Project:		
Number of Samples:		
Sample Type:		
Processing Objective:		
Sample Name List:		
Comments:		
RESULTS SENT TO	REJECTS SENT TO	
Company:	Company:	
Attention:	Attention:	
Address:	Address:	
Phone: Fax:	Phone: Fax:	
E-mail:	E-mail:	

SUBMISSION FOR PROCESSING WORK [2/2]

CFM REQUISITION NUMBER

PROCESSING/ANALYTICAL INSTRUCTIONS

CLIENT AUTHORISATION

On behalf of the Client _____, I request C.F. Mineral Research Ltd. to process these samples using the attached instructions, superseding, modifying or complementing those of any prior date.

Signed: _____ Date: _____