



1435 Allec Street • Anaheim, CA 92805
Tel: 1-714-999-1616 • Fax: 1-714-999-1636
www.thetestlab.com

Independent Materials Testing for Electronics – Laminates – Composites.

TEST REQUEST FORM

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SHIP TEST REPORT(S) TO THE ATTENTION OF: _____ VIA: _____

PURCHASE ORDER NUMBER: _____

THESE SPECIMENS REPRESENT THE PRODUCTION MONTH OF: _____ 20_____

TANK NUMBER: _____

PLATING PERIOD: _____

INDICATED TYPE OF TESTING TO BE PERFORMED BELOW:

[] Test to Copper/Tensile Elongation / Copper Purity—Please indicate the specification below:

Test to specification: WS-6536 _____

Test to specification: IPC-TM650; method 2.4.18.1 _____

Test to specification: IPC 6012, 6013 (Latest Revision) _____

Test to specification: MIL-PRF-31032/1B (Latest Revision) _____

NAME: _____ TITLE: _____

PHONE NUMBER: _____ EXTENSION: _____

SIGNATURE: _____