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| **DATE** |  |
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| **RMA#/PO#** |  |

**Materials Research Laboratory**
University of Illinois at Urbana-Champaign
Room 190, MRL, 104 South Goodwin Avenue
Urbana, IL 61801 MC-230
(217) 300-5050

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|  |  |  Next Day Needed |
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| Name: | Email: |
| **CFOP** |

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**the dimensions, weight, and description of your shipment is required.**

**We are unable to ship chemicals or samples with chemical materials without a Safety Data Sheet. Please attach a SDS with your request.**

**PARCEL 1**  Length (in) \_\_\_\_\_\_\_\_\_ Width (in) \_\_\_\_\_\_\_\_\_\_ Height (in) \_\_\_\_\_\_\_\_\_ Weight (lbs) \_\_\_\_\_\_\_\_\_

Brief Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(If applicable): INV# \_\_\_\_\_\_\_\_\_\_\_\_\_\_ SERIAL # \_\_\_\_\_\_\_\_\_\_\_\_\_\_ **\*INSURANCE VALUE $**\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARCEL 2**  Length (in) \_\_\_\_\_\_\_\_\_ Width (in) \_\_\_\_\_\_\_\_\_\_ Height (in) \_\_\_\_\_\_\_\_\_ Weight (lbs) \_\_\_\_\_\_\_\_\_

Brief Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(If applicable): INV# \_\_\_\_\_\_\_\_\_\_\_\_\_\_ SERIAL # \_\_\_\_\_\_\_\_\_\_\_\_\_\_ **\*INSURANCE VALUE $**\_\_\_\_\_\_\_\_\_\_\_\_\_