



TEM Analysis Services

We help you see things more clearly

Analysis Request Form

www.tem-analysis.com

info@tem-analysis.com
ph 817-400-6547

Ship Samples to: TEM Analysis Services, Attn: Sandra Keller, 517 Inland Cr., Azle, TX 76020

Required with Submission: PO# or Credit Card information, Analysis Request Form, Card owner's signature if using credit card

Please Note: We charge a 3% convenience fee for credit cards.

CONTACT PERSON

Company:

Salutation: ☐ Mr. ☐ Ms. ☐ Dr. ☐ Other _____

Contact Name:

Mailing Address:

City, State, ZIP:

Phone:

Email:

Notes:

ACCOUNTS PAYABLE CONTACT

All Invoices Will Be Sent Via Email Unless Otherwise Directed

Contact Name:

Email:

Phone:

Purchase Order --OR-- Credit Card Information Required

Purchase Order #: (Hard Copy Required)

Credit Card #:

Exp. Date:

Security Code:

Name on Card:

Billing Zip Code (Credit Card Holder):

Credit card holder signature

SAMPLE ID	SAMPLE STRUCTURE/COMPOSITION	ANALYSIS REQUIRED

Pertinent Sample Drawing(s):

FOR OFFICE USE ONLY

Date Samples Rec'd:

Approx Due Date:

Confirmed Sample Receipt Email:

PO/CC Received:

By:

Notes:

Please submit this completed form with your samples. Please ship samples using NO SIGNATURE REQUIRED shipping option and provide us a tracking number, when available to: info@tem-analysis.com