



# SOUTHEASTERN TESTING LABORATORY, INC.

1030 Astondale Road  
Bishop, GA 30621

Phone (706) 769-6645 Fax (706) 769-6647

DATE:			
COMPANY NAME:			
<b>SHIPPING ADDRESS:</b>			
CONTACT NAME/PHONE #: (For this Shipment)			
ADD'TL CONTACT NAME/PHONE #:			
<b>BILL TO ADDRESS: (if different from above)</b>			
ACCOUNTS PAYABLE CONTACT NAME: PHONE#/EMAIL:			
BILLING EMAIL ADDRESS: (If different than AP above)			
<b>DATE TO BE RETURNED:</b>			
<b>PAYMENT METHOD</b>			
Purchase Order - Copy of PO is required		Enter PO #	
Credit Card		CC Instructions Below: Note- Items will be shipped once payment is received	
<p><b>YOU CAN MAKE A CREDIT/DEBIT CARD PAYMENT ON OUR WEBSITE AT <a href="http://WWW.SOUTHEASTERNTTESTING.COM">WWW.SOUTHEASTERNTTESTING.COM</a></b>          If you prefer not to use the website option, give us a call 706-769-6645, Ext #3, and provide your credit card information. Or you can email it to <a href="mailto:Wanda@setlabs.com">Wanda@setlabs.com</a></p>			
<b>PACKAGE CONSISTS OF:</b>			
	Enter Count Below:	List included in the Box:	Comments/Notes:
Gloves	COUNT:		
Sleeves	COUNT:		
Sticks/Hoist/Detectors	COUNT:		
Rubber Goods	COUNT:		
Include New Zip Bags for \$1.25 Bag Fee for Each:			
<b>HOW SHOULD WE HANDLE FAILED ITEMS</b>			
Replace Gloves Rejects:	Replace Sleeve Rejects:	Repair Sticks/Hoist:	CALL -Enter Phone#:
<b>RETURN SHIPPING METHOD (Enter Info for One Method Below)</b>			
Fed Ex Prepay and Add:		Fed Ex Customer Account- Enter Number/Billing Zip Code:	
Other:		UPS Customer Account- Enter Acct Number/Billing Zip Code:	
<b>PLEASE ENCLOSE THIS SHIPPING FORM EACH TIME YOU SEND IN ITEMS</b>			