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Phenolphthalein Test Indicator, Served worldwide.

(mo/yr)

(mo/yr)

2 vistan Revisions Rev: E.O. Number - Description Letter Date July 26 Ect, Used On Contract#: **Your Company Name** Prepared By: Originator: Your Dept: LABORATORY PROCEDURE Your Dept: Your Dept: Your Procedure # CAGE: Your Dept: Size: 1 of 5 Form Rev: Orig

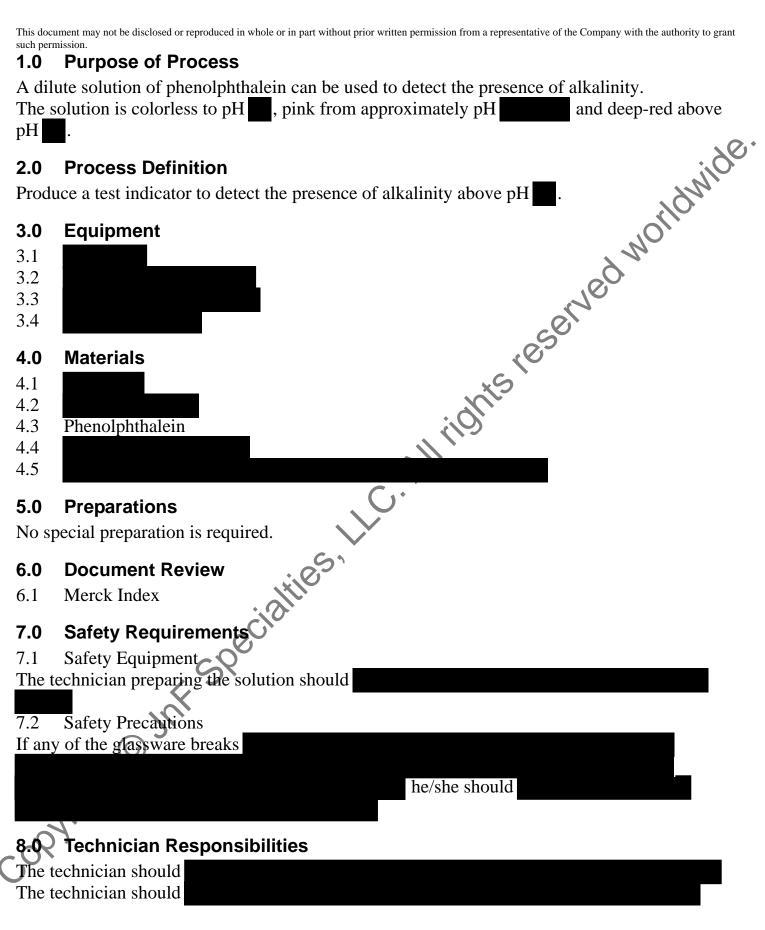
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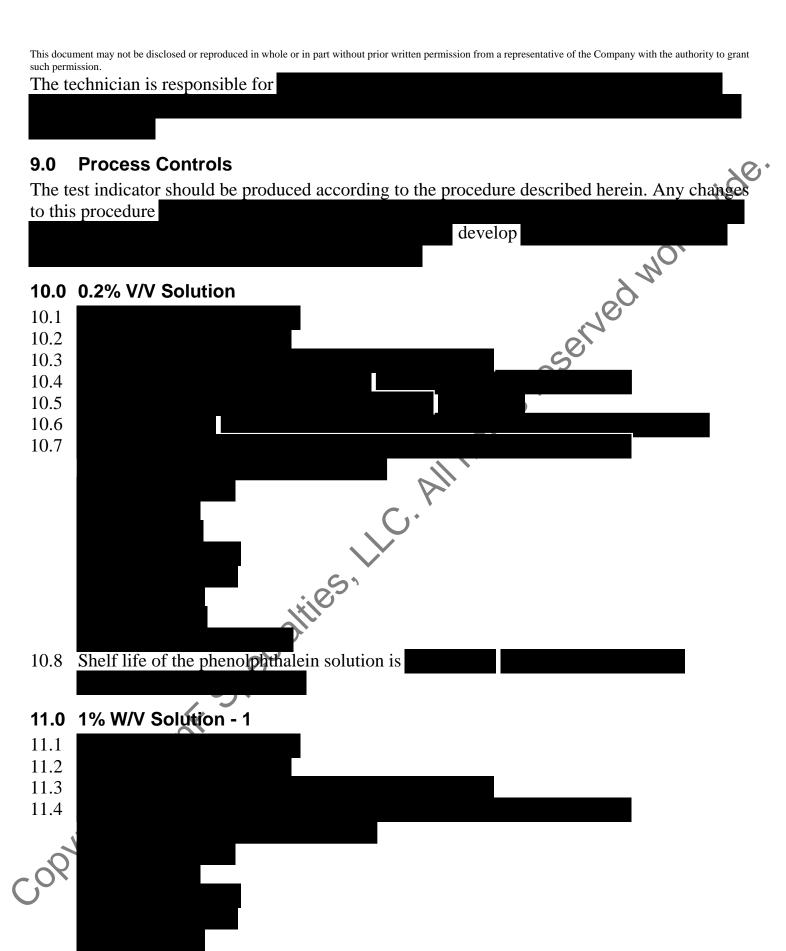
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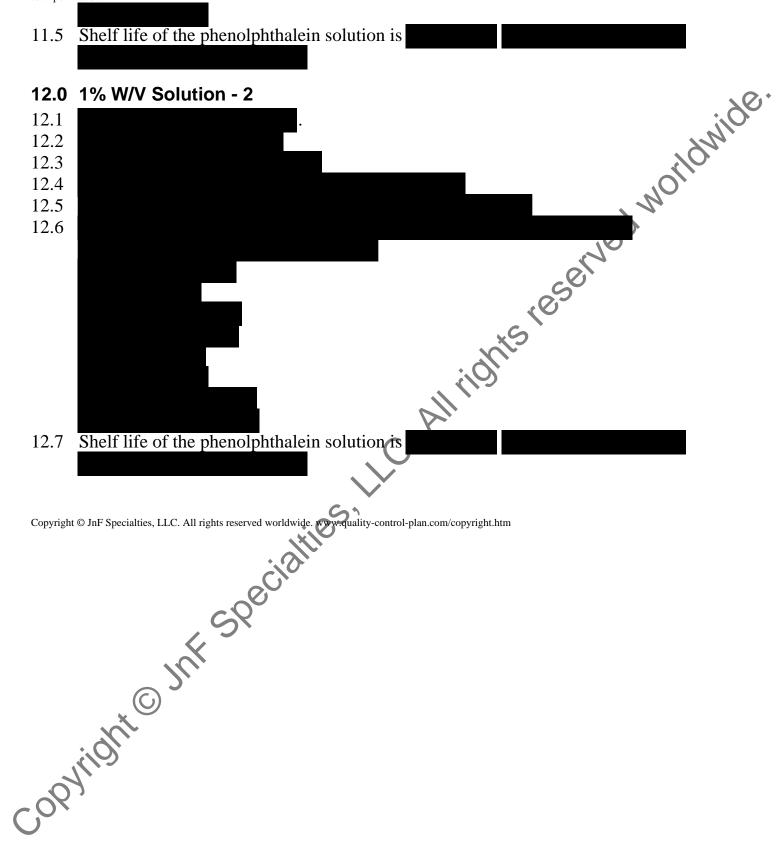
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