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| **THIN SECTION REQUEST FORM** |
| **Name:**  | **Date:**  |
| **Email:**  | **Tel:**  |

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|  | **Sample No.** | **Rock type** | **TS/PS/PTS/PT/FL/OM/****GM** | **Blue** | **UV** | **Stain** | **Hazards** | **Other info** |
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Please attach a **Purchase Order** to all request forms if available. If not, please provide details of your accounts payable below:

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| Name:  |
| Address:  |
| Tel:  | Email:  |