HAZARDOUS CHEMICAL WARNING LABEL

1. CHEMICAL/COMMON NAME

2. HAZARD CODE

3. NSN/LSN

4. PART NUMBER

5. ITEM NAME

6. HAZARDS *(X all that apply)*	(1) ACUTE *(Immediate)*				(2) CHRONIC *(Delayed)*
	NONE	**SLIGHT**	**MODERATE**	**SEVERE**	
a. HEALTH					
b. CONTACT					
c. FIRE					
d. REACTIVITY					

7. SPECIFIC HAZARDS AND PRECAUTIONS *(Including target organ effects) (See MSDS for further information.)*

8. PROTECT *(X all that apply)*		EYES		SKIN		RESPIRATORY

9. CONTACT a. COMPANY NAME

b. ADDRESS *(Street, P.O. Box, City, State, ZIP Code, Country)*

c. EMERGENCY TELEPHONE NUMBER *(Include Area Code)*

10. PROCUREMENT YEAR FOR HAZARDOUS CHEMICAL

DD FORM 2522, OCT 2000

Reset

PREVIOUS EDITION MAY BE USED.

Adobe Professional 7.0