

LAUR SILICONE

ONE PART™ Liquid Silicone Rubber

Thank you for your interest in our new ONE PART™ liquid silicone with EASY CURE™ technology. We are in the early stages of commercialization. Please help us understand your needs and desires.

Company: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Contact(s): _____

Job Title: _____

Phone: _____

E-mail: _____

What material would you like:

Durometer(s): _____

Would you like to be able to blend to durometers: Yes No

Color(s): _____

Packaging: Drums: 5 gallon pails: Tubes:

Does the material need to be Food Grade*: Yes No

Do you want the material to bleed fluid: Yes No

What is your estimated usage for ONE PART™ LSR: _____

Any application details that you can furnish: _____

**Laur Silicone, Inc. does not supply materials for implant or any critical devices*

(Please print and fill out questionnaire and then fax to: 989-435-7707)