

_____ (Date)

To _____ DSF _____ Location

_____ MSM _____ Location

This is to inform you that I do not expect to be able to complete, within the prescribed time period, the following test procedures;

_____ Due _____

_____ Due _____

_____ Due _____

_____ Due _____

_____ Due _____

The following are the reasons;

Please advise how and when you wish completion of these tests to be handled.

Signed _____

Date _____

Cc: _____ Local Chairman

_____ Vice General Chairman