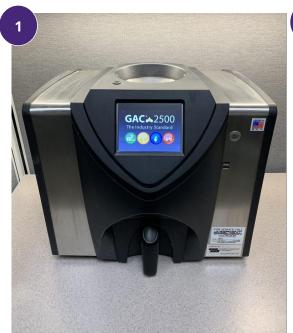
MOISTURE ANALYSIS AT RECEIVING









From SOP #: _____