

Material Safety Data Sheet

May be used to comply with
OSHA's Hazard Communication Standard
29 CFR 1910.1200. Standard must be
consulted for specific requirements

U.S. Department of Labor

Occupational Safety and Health Administration
(Non-Mandatory Form)
Form Approved
OMB No. 1218-0072

Identity (As used on label and list)**LOTION SOAP****92100, 95100, 98100**

*Note: Blank spaces are not permitted. If any item is not applicable, or
no information is available, the space must be marked to indicate that.*

SECTION I

Distributor's Name

Wausau Bay West Paper

Emergency Telephone Number

1-800-723-0008

Address

1150 Industry Road

Telephone Number for Information

1-800-723-0008

City, State, Zip Code

Harrodsburg, KY 40330-0189

Date prepared

12/2004**SECTION II - Hazardous Ingredients/Identity Information**

| Hazardous Components (Specific Chemical Identity: Common Name(s)) | OSHA PEL | ACGIH TLV | OTHER LIMITS RECOMMENDED | %(Optional) |
|---|------------|------------|-----------------------------|-------------|
| Alpha Olefin Sulfonate | N/A | N/A | | |
| Sodium Chloride CAS 7647-14-5 | N/A | N/A | | |
| Cocamide MIPA | N/A | N/A | | |
| FD&C Red #4 | N/A | N/A | | |
| FD&C Red #33 | N/A | N/A | | |

N/A = Ingredient not usually considered hazardous; no TLV or PEL available

This product contains no SARA 313 reportable substances.

Hazard Rating Scale: Health = 1 Fire = 0 Reactivity = 0

SECTION III - Physical/Chemical Characteristics

| | | | |
|-------------------------|---------------|---|------------------|
| Boiling Point | 212° F | Specific Gravity (H ₂ O = 1) | 1.0 estd. |
| Vapor Pressure (mm Hg.) | N/A | Melting Point | N/A |
| Vapor Density (AIR = 1) | N/A | Evaporation Rate (Butyl Acetate = 1) | N/A |

Solubility in Water **Soluble**Appearance and Odor **Pink liquid, citrus fragrance****SECTION IV - Fire and Hazard Data**

| | | | |
|-------------------------------------|-----------------------------|-----------------|-----------------|
| Flash Point (Method Use) N/A | Flammable Limits N/A | LEL None | UEL None |
|-------------------------------------|-----------------------------|-----------------|-----------------|

Extinguishing Media **Mist, foam, spray or dry chemical**Special Fire Fighting Procedures **Will burn after water evaporates from product**Unusual Fire and Explosion Hazards **None**

| | | | | |
|---|---|--|--|---|
| SECTION V - Reactivity Data | | | | |
| Stability | | Unstable <input type="checkbox"/> | Stable <input checked="" type="checkbox"/> | Conditions to Avoid None |
| Incompatibility (Materials to Avoid) Acids, oxidizers, active metals | | | | |
| Hazardous Decomposition or Byproducts None | | | | |
| Hazardous Polymerization | | May Occur <input type="checkbox"/> | Will Not Occur <input checked="" type="checkbox"/> | Conditions to Avoid None |
| SECTION VI - Health Hazard Data | | | | |
| Route(s) of Entry: | | Inhalation? Not Significant | Skin? Not Significant | Ingestion? Not Significant |
| Health Hazards (Acute and Chronic) Slight irritation | | | | |
| | | | | |
| Carcinogenicity: | | NTP? No | IARC Monographs? No | OSHA Regulated? No |
| | | | | |
| Signs and Symptoms of Exposure Slight skin irritation in very sensitive individuals. | | | | |
| | | | | |
| Medical Conditions Generally Aggravated by Exposure None known | | | | |
| | | | | |
| Emergency and First Aid Procedures Eyes: Flush with water | | | | |
| | | | | |
| SECTION VII - Precautions for Safe Handling and Use | | | | |
| Steps to be Taken in Case Material is Released or Spilled Wipe up small amounts and flush area to drain; collect and return large amounts to containers. | | | | |
| | | | | |
| Waste Disposal Method Dispose of in accordance with all applicable local, state, and federal regulations. | | | | |
| | | | | |
| Precautions to be Taken in Handling and Storing Store in cool, dry place | | | | |
| | | | | |
| Other Precautions None | | | | |
| | | | | |
| SECTION VIII - Control Measures | | | | |
| Respiratory Protection (<i>Specific Type</i>) None required | | | | |
| Ventilation | Local Exhaust <input type="checkbox"/> N/A | Mechanical (General) <input type="checkbox"/> N/A | Special <input type="checkbox"/> N/A | Other <input type="checkbox"/> N/A |
| Protective Gloves If prolonged exposure | | Eye Protection None required | | |
| Other Protective Clothing or Equipment None required | | | | |
| Work/Hygienic Practices None | | | | |
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