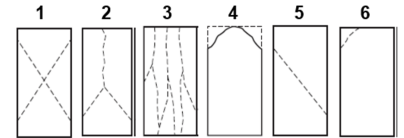


# COMPRESIVE STRENGTH TEST REPORT (CSA A23.2-9C)



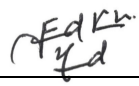
Date:  
Specified Strength (MPa):  
Batch Number:  
Client:  
Site Address:  
Subclient/Contractor:



\*TYPE OF FRACTURE REQUIRED WHEN CYLINDER FAILS TO MEET SPECIFIED 28 DAY STRENGTH.

Lab No	Casting Date	Receiving Date	Curing	Age	Testing Date	Diameter (mm)	Mass of Cylinder (g)	Density (kg/m <sup>3</sup> )	Compressive Strength (MPa)	Type of Fracture*
22-0600003A-7D-1	25-05-2022	26-05-2022	Moisture Room	52-D	01-06-2022	101.0	3710	2292	35.4	2
Mary	Ramos	19	19	19	19	19	19	19	19	19
Carlson	Banks	31	31	31	31	31	31	31	31	31
Lucas	Cimon	x	x	x	x	x	x	x	x	x
x	x	x	x	x	x	x	x	x	x	x

Mix ID:	ANS	Cylinders Cast at PLT:	ANS
Ticket ID:	ANS	Concrete Supplier:	ANS
Specified Slump (mm):	ANS	Specified Air (%):	ANS
Measured Slump (mm):	ANS	Measured Air (%):	ANS
Load No.:	ANS	Truck No.:	ANS
Concrete Temperature (°C):	ANS	Type of Mould:	ANS
Ambient Temperature (°C):	ANS	Casting Time:	ANS
Initial Curing Temperature (°C):	ANS	Time of Charge:	ANS
Casted By:	ANS	Nominal Size of Aggregate (mm):	ANS
Location:	ANS	Initial Curing Temperature (Minimum °C):	ANS
PLT #:	ANS	Initial Curing Temperature (Maximum °C):	ANS

Signature:   
Fawad Khan  
Lab Manager