Updated 6/2020

**KSU Submission Form for Camping Mattress Tests**

Please email this form in Word format to [merediths@ksu.edu](mailto:merediths@ksu.edu) each time you send a set of camping mattresses for testing.

**1. Company name, address, phone, contact person and email address.** We will email the report and invoice to the contact listed below.

|  |  |
| --- | --- |
| Company name and address: | Contact name:  Email:  Phone: |

If another company is paying for the test and/or you want the invoice sent to another person, please indicate it here.

**2. Purchase order number for testing:**  List it here or send a PO document.

**Camping Mattress Test for consumer-facing claims \_\_\_ @ $600 =**

**Camping Mattress Test for prototypes\_\_\_ @ $465 =**

**3. Test protocol:**

The thermal resistance (R-value) of camping mattresses is determined according to ASTM F 3340, Standard Test Method for Thermal Resistance of Camping Mattresses Using a Guarded Hot Plate Apparatus. Standard test conditions are as follows:

Air temperature = 20°C Cold plate temperature = 5°C

Relative humidity = 20 - 80% Hot plate temperature = 35°C

Specimen Inflation Pressure = 3.5 ± 0.2 kPa

Specimen Compression Pressure = 2.0 ± 0.1 kPa

**Replications.** Option A ($600) is required for consumer-facing claims that cite ASTM F3340. Option B ($465) may be selected for testing prototypes.

\_\_\_\_\_A. independent replications (3 locations each) on 3 identical, full-sizecamping mattress specimens

\_\_\_\_\_B. 3 replications on 1 made-to-fit camping mattress specimen, *or*

3 independent replications on 3 identical, made-to-fit camping mattress specimens, *or*

1 replication (3 locations) on 1 full-size camping mattress specimen

***-----continued-----***

**4. Camping mattress letter codes:** Give the sample codes and descriptions for the report here.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sample Code** | **Number of Specimens** | **Specimen Size** | **Sample Thickness** | **Sample Description** |
| **A** | 1 or 3 | full-size  or  made-to-fit |  | Type sample description here. For example, product name, manufacturer, description, construction type, insulation, shape, length, width, etc. |
| **B** |  |  |  |  |
| **C** |  |  |  |  |
|  |  |  |  |  |

**5. Return shipping information:** We will use the address above unless you give us other instructions.

|  |  |
| --- | --- |
| \_\_\_\_\_UPS Account #:  \_\_\_\_\_Federal Express Account #:  \_\_\_\_\_DHL Account #:  \_\_\_\_\_Do not return camping mattresses (discard or donate) | Shipping address if different from above: |

**6. Export Controls Compliance:**

(a) Is the company or the individual named above contracting, working, or acting for or on behalf of a national government? Yes \_\_\_\_\_ No \_\_\_\_\_

(b) If you answered ‘Yes’ to 6 (a), briefly describe the nature of the relationship with the national government \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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