Retain this container, we will pick up and reuse.
Conserve esta contenedor, vamos a recogerla y reutilizarla.

FIRST AID: If swallowed: Call a poison center if you feel unwell. Rinse mouth. **If on skin**: Wash with plenty of water. If skin irritation occurs, get medical advice. Take off contaminated clothing and wash it before reuse. **If in eyes:** Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists, get medical advice. **FOR MEDICAL INFORMATION CALL 1-866-923-4946.**

PRIMEROS AUXILIOS: Si se ingiere: Llame a un centro de envenenamiento en caso de malestar. Enjuagar la boca. **Si en la piel:** Lavar con abundante agua. Si se produce irritación de la piel, busque ayuda médica. Quítese la ropa contaminada y lávela antes de volverla a usar. **Si en los ojos:** Aclarar cuidadosamente con agua durante varios minutos. Quitar los lentes de contacto, si los lleva puestos y si se encuentran fácil de removerlos. Proseguir con el lavado. Si la irritación ocular persiste, consultar a un médico.
PARA INFORMACIÓN MÉDICA LLAME AL 1-866-923-4946.

FOR INDUSTRIAL AND INSTITUTIONAL USE ONLY
PARA USO INDUSTRIAL E INSTITUCIONAL SOLAMENTE

Do not eat, drink or smoke when using this product. Wash hands thoroughly after handling. Wear eye protection and protective gloves.
No coma, beba ni fume mientras se manipula este producto. Lávese bien las manos después de manipular. Use protección ocular y guantes de protección.

Dispose of contents in accordance to all federal, state and local regulations.
Eliminar el contenido de acuerdo a todas las regulaciones federales, estatales y locales

USE DIRECTIONS: Add 1 scoop (4oz) per 10 gallons of warm (110ºF) water in soak sink or plastic container. Allow stained items to soak a minimum of 30 minutes. Badly stained articles may require overnight soaking. After soak period, do not dry articles – place immediately in washer and run through normal wash formula.

INDICACIONES DE USO: Añadir 1 cucharada (4 oz) por cada 10 galones de agua tibia (110ºF) agua en remojo fregadero o recipiente de plástico. Permitir artículos manchados en remojo un mínimo de 30 minutos. Mal artículos manchados pueden requerir remojo durante la noche. Después de período de remojo , hacer artículos no secos - lugar de inmediato en la lavadora y ejecutar a través de la fórmula de lavado normal .

INGREDIENTS / INGREDIENTES

Sodium Tripolyphosphate / Tripolifosfato de sodio (CAS No. 7758-29-4), Enzyme Preparation / Preparación de Enzimas (CAS No. Mixture)

Contains 24.50 % Phosphorus / Contiene 24,50% Fósforo

Auto-Chlor SYSTEM
746 Poplar Avenue
Memphis, TN 38105
901-579-2300
autochlor.com

L10549 (155/15)

Auto-Chlor SYSTEM

Fabra Kleen

ENZYME BOOSTER

Enzymatic Presoak
Enzimática Remoje

WARNING! Causes skin and serious eye irritation. Harmful if swallowed or in contact with skin.
ADVERTENCIA! Causa irritaciones graves en la piel y en los ojos. Peligroso si se ingiere o si hay contacto con la piel.

A0549025 **11.3 kg (25 lbs)**

LABEL SIZE: 6.25" X 15.125"

BLACK
PANTONE 347
PANTONE 337
PANTONE 179

Please proof "text" and "layout" carefully. This includes, but is not limited to repeats, cut lengths, sensor size and placement, machine compliance, artwork placement and size.

UPC's for shrink sleeves should be placed ladder style for optimal scan ability on sleeves.
Spot colors shown on this proof are a representation only. Actual colors will be matched to the latest PANTONE Plus series color standards at time of printing unless custom swatches were provided.

Please examine for any errors in placement, color, spelling, fonts, design or distortions. Please verify carefully.
We will not accept responsibility for any errors or omissions after job has been manufactured.

APPROVED ☐ CHANGES MARKED ☐

SIGN _____

PRINT _____

DATE _____

THIS APPROVAL INDICATES CLIENT ACCEPTANCE OF THE MANUFACTURE OF ABOVE SPECIFICATIONS. THIS IS THE FINAL DOCUMENT AND SUPERSEDES ALL PRIOR COMMUNICATIONS.

REF. NO.: **A41993** JOB NO.: **XXXXXX**
CUSTOMER: **AUTO CHLOR**
JOB DESC.: **ACL1549**
ENZYME BOOSER

DATE: **06.09.15**
DIE PO: **XXXXX**
CSR: **AW**
OPERATOR: **JS**
GEARING: **XX on XX - XX**