EQUIPMENT: *Simplimet 2000 Automatic Mounting Press*

SIGNIFICANT SAFETY PRECAUTIONS: Machine has pinch points and high temperatures. Take precautions to avoid injury, including safety glasses.

APPROVED BY: __________________________ DATE: __________

PREPARED BY: Zhuoying Jiang DATE: 9/14/2012

<table>
<thead>
<tr>
<th>JOB STEPS</th>
<th>SAFETY KEY POINTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Prepare the Equipment</td>
<td>Take caution not to cut yourself with the blade.</td>
</tr>
<tr>
<td>Make sure the mounting top and base are clean. If not, scrape dirt away with a sharp blade.</td>
<td></td>
</tr>
<tr>
<td>1.2 Insert the sample</td>
<td>Make sure the base is eventually placed at the lowest position.</td>
</tr>
<tr>
<td>Put samples on the base with the face to be detected down, then press RAM DOWN to lower the base.</td>
<td></td>
</tr>
<tr>
<td>1.3 Add Mounting Powder</td>
<td>If find something abnormal during mounting, quickly press the red STOP/RESET button. After making sure everything is under control, restart the cycle.</td>
</tr>
<tr>
<td>Add an appropriate amount (usually one scoop) of mounting powder and close the lid. Note: mounting powder must be provided by the user.</td>
<td></td>
</tr>
<tr>
<td>1.4 Start the Cycle</td>
<td></td>
</tr>
<tr>
<td>Set SETUP parameters and start the cycle. Please refer to the instructions attached to the mounting powder to set parameters.</td>
<td></td>
</tr>
<tr>
<td>1.5 Remove your Sample</td>
<td></td>
</tr>
<tr>
<td>When finished, open the lid and lift the base to remove the mounted sample.</td>
<td></td>
</tr>
</tbody>
</table>
1.6 Cleanup Clean the mounting top and base for the convenience of the next user.

**Authorized Operators:**

Name: Zhuoying Jiang  Signature: ___________________________  Date: 9/14/12

Name: ___________________________  Signature: ___________________________  Date: ________

Name: ___________________________  Signature: ___________________________  Date: ________

Name: ___________________________  Signature: ___________________________  Date: ________

Name: ___________________________  Signature: ___________________________  Date: ________

Name: ___________________________  Signature: ___________________________  Date: ________

Name: ___________________________  Signature: ___________________________  Date: ________

**CERTIFICATION**

I hereby certify that on ______ / ______ / ______ a hazards assessment of this procedure was performed for the purpose of specifying Personal Protective Equipment (PPE). I also certify that all authorized operators participated in the assessment, and received and understood training regarding PPE requirements for this procedure and that all authorized operators participated in the assessment and were trained in the proper PPE for the tasks described in this SOP.

Signature: ___________________________  Name of Manager

Title: ___________________________

Date: ___________________________
Personal Protective Equipment (PPE)
Hazard Assessment Certification

I __________________________ hereby certify that on ___/___/___ a
hazards assessment of area __________________________ was performed for
the purpose of specifying Personal Protective Equipment (PPE). I also
certify that the following employees received and understood training
regarding PPE requirements for this area.

(Please Print)

Name: _______ Zhuoying Jiang Name: ____________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name: __________________________

Name: __________________________ Name of Managers

Signature: __________________________
Title: __________________________
Date: __________________________