

MATERIAL SAFETY DATA SHEET

MANUFACTURER OR DISTRIBUTOR: Jack Richeson & Co., Inc.
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PO BOX 160
Kimberly WI 54136-1760

INFORMATION TELEPHONE NUMBER: 920-738-0744

EMERGENCY TELEPHONE NUMBER: 800-233-2404

----- SECTION I - PRODUCT IDENTIFICATION

PRODUCT NAME: WATERCOULOR TABLETS PRODUCT NO. TEMP-01

PRODUCT SIZES:

PRODUCT CLASS: WATER COLORS (SEMI-MOIST)

SECTION II - HAZARDOUS INGREDIENTS

INGREDIENT	CAS#	PEL/TLV (MG/M3)	MAX %WEIGHT	NTP	IARC

None					

SECTION III - PHYSICAL AND CHEMICAL CHARACTERISTICS

BOILING POINT: N/A	MELTING POINT: N/A
VAPOR PRESSURE: N/A	SPECIFIC GRAVITY: N/A
SPECIFIC VAPOR DENSITY (AIR=1): N/A	REACTIVITY IN WATER: NON-REACTIVE
SOLUBILITY IN WATER: N/A	
APPEARANCE AND ODOR:	

----- SECTION IV - FIRE AND EXPLOSION INFORMATION

FLASH POINT (METHOD): N/A AUTOIGNITION TEMPERATURE: N/A
EXPLOSION LIMITS IN AIR (% BY VOLUME): NOT EXPLOSIVE
EXTINGUISHING MEDIA: NO SPECIAL MEDIA REQUIRED
FIRE FIGHTING PROCEDURES: NO SPECIAL FIRE FIGHTING PROCEDURES REQUIRED
UNUSUAL FIRE & EXPLOSION HAZARDS: NOT COMBUSTIBLE

SECTION V - PHYSICAL HAZARDS/REACTIVITY

HAZARDOUS POLYMERIZATION PRODUCTS: NONE
STABILITY: STABLE CONDITIONS TO AVOID: NONE
INCOMPATIBILITY (MATERIALS TO AVOID): NONE
HAZARDOUS DECOMPOSITION PRODUCTS: NONE

COMPANY: Jack Richeson & Co., Inc. PRODUCT: TEMP-01
BRAND NAME: WATERCOULOR TABLETS

SECTION VI HEALTH HAZARD DATA

PERMISSIBLE EXPOSURE LEVEL: SEE SECTION II FOR COMPONENT PEL/TLVs

PRIMARY ROUTES OF ENTRY: EYE, SKIN, INGESTION

EFFECTS AND SYMPTOMS OF ACUTE EXPOSURE: NONE EXPECTED

EFFECTS AND SYMPTOMS OF CHRONIC EXPOSURE: NONE EXPECTED

CARCINOGEN LISTING: NTP: NO IARC: NO OSHA: NO
SEE SECTION II FOR COMPONENTS AFFECTED

MEDICAL CONDITIONS USUALLY AGGRAVATED BY OVER EXPOSURE TO THIS PRODUCT: NONE

FIRST AID MEASURES: NONE REQUIRED. NO ACUTE HEALTH EFFECTS EXPECTED

-- SECTION VII - SPILL OR LEAK PROCEDURES

PRECAUTIONS TO BE TAKEN DURING STORAGE AND HANDLING: NO SPECIAL
PRECAUTIONS REQUIRED.

STEPS TO BE TAKEN IN CASE A MATERIAL IS SPILLED: NO SPECIAL SPILL
PROCEDURES REQUIRED.

WASTE DISPOSAL METHOD: DISPOSE IN ACCORDANCE WITH FEDERAL, STATE AND
LOCAL REGULATIONS.

SECTION VIII PROTECTIVE EQUIPMENT/CONTROL MEASURES

RESPIRATORY PROTECTION AND SPECIAL VENTILATION REQUIREMENTS: NONE REQUIRED

OTHER PROTECTIVE EQUIPMENT (GLOVES, GOGGLES, ETC): NONE REQUIRED

WORK/HYGIENE PRACTICES: NONE REQUIRED

SECTION IX - ADDITIONAL INFORMATION AND WARNINGS

NONE REQUIRED

Form Completed by: Woodhall Stopford, MD, MSPH
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