

Material Safety Data Sheet May be used to comply with OSHA's Hazard Communication Standard, 29 CFR 1910.1200. Standard must be consulted for specific requirements.

U.S. Department of Labor

Occupational Safety and Health Administration (Non-Mandatory Form)

Form Approved OMB No. 1218-0072



	OMB No. 1218-0072							
	Note: Blank spaces are not permitted. If any item is not applicable, or no information is available, the space must be marked to indicate that.							
Manufacturer's Name MINOLTA CORPORATION, U.S.A. Address (Number, Street, City, State, and ZIP Code)				Emergency Telephone Number CONTACT YOUR REGIONAL POISON CONTROL				
	CENTER OR JAPAN PHONE #06-271-2251							
	AUGUST 10, 1987 Signature of Preparer (optional)							
y information	<u>L</u>							
Hazardous Components (Specific Chemical Identity; Common Name(s))				% (optional				
.ymer				> 85				
				4				
				5				
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	6				
Dust)								
Dust)								
stics								
N.A.	Specific Gravity (H	1 ₂ O = 1)		1.2				
N.A.	Melting Point N . A			N.A.				
N.A.	Evaporation Rate (Butyl Acetate = 1)		N.A.				
faint oc	or							
ata				· ·				
	Flammable Limits		LEL N.A.	UEL N.A.				
Dry Chem	ical							
lation o	f smoke.							
·		- 3	31	a				
			dispersed	in.				
orms exp	tosive mix	ctures.						
	y information nmon Name(s)) ymer Dust) Dust) stics N.A. N.A. N.A. Vfaint od ata Dry Chem alation of	Emergency Telegrand CONTACT Telephone Numb CENTER Of Date Prepared AUGUST 10 Signature of Prepared Signature of Prepared Signature of Prepared Dust (Signature of Prepared	A. Evaporation Rate Note: Blank spaces are not permitted. information is available, the space information is available, the space information information in the space	Note: Blank spaces are not permitted. If any item is not a information is available, the space must be marked information is available, the space must be marked. A. CONTACT YOUR REGIONAL POISON Telephone Number for Information CENTER OR JAPAN PHONE #06-27. Date Prepared AUGUST 10, 1987 Signature of Preparer (optional) y information The property of Preparer (optional) y information The property of Preparer (optional) y information The prepared AUGUST 10, 1987 Signature of Preparer (optional) y information The property of Preparer (optional) y information The property of Preparer (optional) The property of Preparer (optional) Stics N.A. Specific Gravity (H ₂ O = 1) N.A. Melting Point N.A. Evaporation Rate (Butyl Acetate = 1) If aint odor The property of Preparer (optional) Alation of Smoke. The property of Preparer (optional) LEL N.A. Dry Chemical Alation of Smoke.				

Section V —	Reactivity Data				B 1849	y sign		
Stability	Unstable		Conditions to	Avoid	22 HILL HOUSE OF 'VA	g' Mr		
	Stable							
(annumatibility)	Materials to Avoid)	I X	<u> </u>					
			None				· · · · · · · · · · · · · · · · · · ·	
Hazardous Decor	nposition or Byprodu	cts	Do No	t Burn	- Avo	id Bre	eathing c	of Smoke
Hazardous	May Occur		Conditions to				J	
Polymerization	Will Not Occur	 	·			····		
	11 101 11	X				· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	Health Hazard	Data lation?		· · · · · · · · · · · · · · · · · · ·	Skin?			Ingestion?
Route(s) of Entry	<u>P</u> -		ble		Norm.	not r	possible	Norm. not possible
Health Hazards (Acute and Chronic)	T.D.	i0• >5α,	/Ka (Ra	ts) Pr	actica	ally non-	toxic
	Inhalation			_			ally non-	
	Skin Irrit							
Carcinogenicity:	NTP	7			IARC Mon	graphs?	<u></u>	OSHA Regulated?
			<u>listed</u>		Not L			Not Listed
	city: No m	utaç	enicity	detec	ted in	Ames	Assay	·
Signs and Symp Minimal	toms of Exposure respirator	v tr	act ir	itatio	n may	occur	as	
	osure to 1							
Medical Conditio	ns vated by Exposure	San	ne as no	ormal d	lust. ma	av col	igh and r	aise the phlegm
Generally Aggra	valed by Exposure			······		2		
Emergency and	First Aid Procedures		the inh					
		Was	sh with	soap a	ind wate	er		
								
	- Precautions f							
Steps to Be Tak	en in Case Material	is Hele	ased or Spilled	If	spilled	, swe	ep up or	vacuum.
Waste Disposal	Method		. 7 . 1 1.	. !	1		-1	ico Incuro
								ice. Insure
	ty with fe			te or :	local r	egula	tions.	
Precautions to t	Be Taken in Handling	and S	No:	ne				
Other Precautio	^{ns} None			· · · · · · · · · · · · · · · · · · ·		-		
							······································	
								
	Control Mea tection (Specify Type)		***					
Hespiratory Pro	tection (specify Type)	No	t requi	red whe	en used		ntended :	in Minolta equip.
Ventilation	Local Exhaust		N.A.		-	Special	N.A.	
	Mechanical (Gener	- 41	N.A.			Other	N.A.	
Protective Glove	es .		· · · · · · · · · · · · · · · · · · ·		Eye Pr	otection	Not ros	irad
Other Protective	Not requal Clothing or Equipm				<u> </u>		Not requi	
		U111	ror use	otner	tnan n	ormal	custome	r, use of goggles
Work/Hygienic	Practices		None					may be required