

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

IDENTITY (As Used on Label and List) Basic-H	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.
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Section I

Manufacturer's Name (Distributed by) Shaklee Corporation	Emergency Telephone Number (510) 887-5000
Address (Number, Street, City, State, and ZIP Code) 444 Market Street	Telephone Number for Information (415) 954-3000
San Francisco, CA 94111	Date Prepared 10 March 1995
	Signature of Preparer (optional)

Section II-Hazardous Ingredients/Identity Information

Hazardous Components (Specific Chemical Identity; Common Name(s))	OSHA PEL	ACGIH TLV	Other Limits Recommended % (optional)
Linear Alcohol Alkoxylates			
CAS # 68131-39-5			None established
#52232-09-4			None established
#37311-02-7			None established
#37251-67-5			None established
Or			
#68154-97-2			None established
#68439-50-9			None established

Section III - Physical/Chemical Characteristics

Boiling Point	212° F	Specific Gravity (H ₂ O = 1)	1.005
Vapor Pressure (mm Hg.)	N/A	Melting Point	N/A
Vapor Density (AIR = 1)	N/A	Evaporation Rate (Butyl Acetate = 1)	N/A (water only)
Solubility in Water Complete			
Appearance and Odor Clear light blue-green liquid, syrup-like viscosity.			

Section IV—Fire and Explosion Hazard Data

Flash Point (Method Used) 350° F PMCC	Flammable Limits N/A	LEL N/A	UEL N/A
Extinguishing Media Will not burn or explode.			
Special Fire Fighting Procedures Cool fire exposed containers with water.			

No unusual fire and explosion hazards.

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Other Precautions

Wear splash protection if used repeatedly in large concentrations over a prolonged time period.

Section VIII - Control Measures

Respiratory Protection (Specify Type)

None required with normal use.

Ventilation	Local Exhaust None required	Special None
	Mechanical (General) Acceptable	Other None

Protective Gloves.

None required

Eye Protection

None required

Other Protective Clothing or Equipment

None required

Work/Hygienic Practices

Normal good work practices