MILKING MACHINE TEST REPORT PRELIMINARY SUMMARY NAME: _____ SUPPLY NUMBER: _____ **PLEASE NOTE:** This is only a preliminary report based on what has been found whilst carrying out the milking machine test. The full test details will be sent once analysed and processed. Please call the company or the tester if you have any doubts about the machine. **NO SERIOUS PROBLEMS** NOTES: **URGENT ACTION** NOTES: **REQUIRED** DATE: _____ **INSERT COMPANY LOGO** TESTER NAME: _____ & CONTACT DETAILS **HERE** PHONE: _____