

Concrete Cylinder/Cube Report

Report No.: _____

Client: _____	Subcontractor: _____
Project No.: _____	Subcontract P.O. No.: _____
Project Name: _____	Date: _____

Report of compression test on specimens of concrete placed in _____

Ready-mix supplier _____

Temperature of concrete	°C
Air temperature	°C
Specified min. strength at 28 days	kg/cm ²
Nominal maximum size of coarse aggregate	
No. of sacks of cement per m ³ of concrete	
No. of days cured:	At job site
	In moist room under standard conditions
Admixture	
Date cylinders/cubes made	Date tested
Age (days)	
Compressive strength (kg/cm ²)	

Remarks: _____

	Above data submitted by:
	Name: _____
	Signature: _____