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### Chain of Custody

Instructions: To ensure that all analyses are done correctly, kindly fill out this form completely. Test codes are available in a separate sheet. **Please fill in Print.**

Client:		Sampled by:		Signature:		Payment Information:	
Contact Person:		Delivered by:		Signature:		Invoice #:	
Address:		Quote #:		Report ID #:		P.O. #:	
		Report Delivery Method:				Receipt #:	
Tel #:	Email:	Hard Copy		Soft Copy			

											Test Requested (Select one per sample only)			
Customer ID	Laboratory ID	Sample Date	Sample Time	Sample Label	Sample Size	Sample Integrity	Matrix Type	Type of Container	Preservation	Acceptable	Pesticides	Heavy Metal	Water Quality	Soil Tests
				Y N			Please Select			Y N				
				Y N			Please Select			Y N				
				Y N			Please Select			Y N				
				Y N			Please Select			Y N				
				Y N			Please Select			Y N				
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				Y N			Please Select			Y N				

Received by:	Signature:	Date:	Time:
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Received by:	Signature:	Date:	Time:
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**Note: This form constitutes a contract for the requested services. The laboratory reserves the right to dispose of samples if no information is provided within the timeframe required for analysis.**

















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