# ANALYSIS REQUEST AND CHAIN OF CUSTODY RECORD

(To move through this document, please use your TAB key or mouse.)

**5102 LaRoche Avenue, Savannah, GA 31404**

Phone: (912) 354-7858 Fax: (912) 352-0165

| PROJECT REFERENCE | PROJECT NO. | PROJECT LOCATION |
|---|---|---|
| FPC, Huntsville, AL - Bill Smith | | Orange Walk, Belize |
| STL (LAB) PROJECT MANAGER | P.O. NUMBER | CONTRACT NO. |
| Bernard Kirkland | | |
| CLIENT (SITE) PM | CLIENT PHONE | CLIENT FAX |
| Living Waters for the World | 615-261-4008 | 612-261-4010 |
| CLIENT NAME | CLIENT EMAIL | |
| Steve Young, Adm., Living Waters for the World | steve@livingwatersfortheworld.org | |

CLIENT ADDRESS

318 Seaboard Lane, Franklin, TN 37067

COMPANY CONTRACTING THIS WORK (if applicable):

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STANDARD REPORT DELIVERY ●

DATE DUE

EXPEDITED REPORT DELIVERY (SURCHARGE) ○

DATE DUE

NUMBER OF COOLERS SUBMITTED PER SHIPMENT: 1

| SAMPLE DATE | SAMPLE TIME | SAMPLE IDENTIFICATION | MATRIX TYPE: COMPOSITE (C) OR GRAB (G) *INDICATE* | AQUEOUS (WATER) | SOLID OR SEMISOLID | AIR | NONAQUEOUS LIQUID (OIL, SOLVENT, ETC) | REQUIRED ANALYSES: Hardness | TDS | | Selenium | Antimony | Lead | Mercury | Arsenic | Nickel | | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | PRESERVATIVE | | | | | | | | | | | | | | | | |
| | | NUMBER OF CONTAINERS SUBMITTED | | | | | | | | | | | | | | | | |
| 9/10/2005 | 14:00 | NL PC raw H20 well | | X | | | | X | X | | X | X | X | X | X | X | | only 1 container |
| 9/10/2005 | 18:00 | NL PC treated well | | X | | | | X | X | | X | X | X | X | X | X | | only 1 container |
| | | | | | | | | | | | | | | | | | | |
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| RELINQUISHED BY: (SIGNATURE) | DATE | TIME | RELINQUISHED BY: (SIGNATURE) | DATE | TIME | RELINQUISHED BY: (SIGNATURE) | DATE | TIME |
|---|---|---|---|---|---|---|---|---|
| EMPTY CONTAINERS | 6/12/2006 | 10:00 AM | | | | | | |
| RECEIVED BY: (SIGNATURE) | DATE | TIME | RECEIVED BY: (SIGNATURE) | DATE | TIME | RECEIVED BY: (SIGNATURE) | DATE | TIME |
| EMPTY CONTAINERS | | | | | | | | |

LABORATORY USE ONLY

| RECEIVED FOR LABORATORY BY: (SIGNATURE) | DATE | TIME | CUSTODY INTACT | CUSTODY SEAL NO. | STL-SL LOG NO. | LABORATORY REMARKS: |
|---|---|---|---|---|---|---|
| | | | YES ○ NO ○ | | | |