ANALYSIS REQUEST AND CHAIN OF CUSTODY RECORD

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

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

PROJECT REFERENCE	PROJECT NO.	PROJECT LOCATION
STL (LAB) PROJECT MANAGER Bernard Kirkland	P.O. NUMBER	CONTRACT NO.
CLIENT (SITE) PM Living Waters for the World	CLIENT PHONE 615-261-4008	CLIENT FAX 615-261-4010
CLIENT NAME Steve Young, Living Waters for the World	CLIENT EMAIL steve@livingwatersfortheworld.org	

CLIENT ADDRESS

Fill in address

COMPANY CONTRACTING THIS WORK (if applicable):

MATRIX TYPE

REQUIRED ANALYSES

PAGE 1 OF 1

STANDARD REPORT DELIVERY ◯

DATE DUE

EXPEDITED REPORT DELIVERY (SURCHARGE) ◯

DATE DUE

PRESERVATIVE

NUMBER OF COOLERS SUBMITTED PER SHIPMENT:

SAMPLE DATE	SAMPLE TIME	SAMPLE IDENTIFICATION	COMPOSITE (C) OR GRAB (G) *INDICATE*	AQUEOUS (WATER)	SOLID OR SEMISOLID	AIR	NONAQUEOUS LIQUID (OIL, SOLVENT, ETC)	NUMBER OF CONTAINERS SUBMITTED										**REMARKS**

RELINQUISHED BY: (SIGNATURE)	DATE	TIME	RELINQUISHED BY: (SIGNATURE)	DATE	TIME	RELINQUISHED BY: (SIGNATURE)	DATE	TIME
EMPTY CONTAINERS								
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 YES ◯ NO ◯	CUSTODY SEAL NO.	STL-SL LOG NO.	LABORATORY REMARKS: