Chain of Custody

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Contact: _____ **Company:** _____ **Address** _____ **City, State, Zip Code:** _____ **Phone:** _____ **Fax:** _____	**Carrier:** **USPS** ☐ **FedEx** ☐ **UPS** ☐ **Other** ☐ **Tracking No.:**

Comments - Special Instructions: Regarding Sample Preparation, Analysis Method, Final Report and Return of Samples*.

Date	Sample Identification as Required for the the Final Report	Analysis Request

Relinquished By:	Date	Time	Received By:	Date	Time