


Client Name/Address		Client Project Manager/Contact			Billing Information				For Laboratory Use Only															
Project Description		Project/Site Location (City/State)			RUSH – Additional charges apply Special Detection Limit(s) Date Results Needed				Method of Shipment Fed Ex UPS USPS Courier Client Drop Off Other			Matrix Key WW – Wastewater GW – Groundwater DW – Drinking Water S – Soil /Solid O – Oil P - Product M - Misc												
Project Number		Project Manager Phone #			Project Manager Email				Purchase Order Number			Site/Facility ID #												
 202 Hamilton Ave. Bremen, GA 30110 (770) 832-2171		Unless noted, all containers per Table II of 40 CFR Part 136.			Number of Containers	Matrix (Refer to key)	(G)rab or (C)omposite									A Cool < 10C Na2S2O3 (Micro Only) B Cool <= 6C C H2SO4 pH<2 D None Required E NaOH pH>10 F HNO3 pH<2 G HCL pH<2 H H3PO4 pH<2 I Cool <= 6C NA2S2O3								
								Required Analysis / Preservative									Comments/Notes							
Date	Time	Sample Identification																						
For Laboratory Use Only					Sampled by (Name – Print)					Client Remarks/Comments														
Ice	Custody Seals	Lab Comments																						
Y / N	Y / N																							
Blank/Cooler Temp															Relinquished by: (SIGNATURE)			Date	Time	Received by: (SIGNATURE)			Date	Time
															Relinquished by: (SIGNATURE)			Date	Time	Received by: (SIGNATURE)			Date	Time
Blank/Cooler Temp		Relinquished by: (SIGNATURE)			Date	Time	Received by: (SIGNATURE)			Date	Time													
		Relinquished by: (SIGNATURE)			Date	Time	Received by: (SIGNATURE)			Date	Time													