

## CHAIN OF CUSTODY

Fax: (914) 288-0807

Reference #: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

Page of

<b>Client:</b>		<b>Sampled By:</b>	<b>Turnaround Time</b>
<b>Address:</b>		<b>Sampled Date:</b>	6 hrs__ ; 12 hrs__ ; 24 hrs__ ; 48 hrs__ ; 72 hrs__ ; 5 days__ ; Other_____
		<b>Contact To:</b>	<b>Delivered Method</b> <b># of Samples</b>
<b>Report to:</b>	<b>Bill to:</b>	<b>Phone / Fax:</b>	<b>Lab Name</b>

[illegible]

<b>Relinquished By:</b>	<b>Signature:</b>	<b>Date:</b>	<b>Received By:</b>	<b>Signature:</b>	<b>Date:</b>
<b>Relinquished By:</b>	<b>Signature:</b>	<b>Date:</b>	<b>Received By:</b>	<b>Signature:</b>	<b>Date:</b>
<b>NOTES</b>					