



Chain of Custody Record

1282 Alturas Drive, Moscow ID 83843 (208) 883-2839 FAX 882-9246

Alturas
Log-In #

Company Name:		Project Manager:	
Address:		E-mail:	
City:	State:	Zip:	Project Name & # :
Tel:		Purchase Order # :	
Fax:		Shipped Via/Other:	

Turn Around Time & Reporting

<input type="checkbox"/> Next Day*	Results needed by: ____/____/____	<input type="checkbox"/> Phone
<input type="checkbox"/> 2nd Day*		<input type="checkbox"/> Mail
<input type="checkbox"/> Normal		<input type="checkbox"/> Fax
		<input type="checkbox"/> E-mail

*Please call to verify rush charges before submitting samples

Provide Sample Description				List Analyses Requested										
Lab ID	Sample Identification	Sampling Date/Time	Matrix	# of Containers	Area Swiped **	Methamphetamine								

Note Special Instructions/Comments

*** Please indicate units to be reported ***

ug/100cm²

ug/ft²

Other: _____

	Signature	Printed Name	Company	Date	Time
Relinquished by					
Received by					
Relinquished by					
Received by					
Relinquished by					
Received by					

Lab Use Only

Received Intact?	YES	NO
Labels & Chain Agree?	YES	NO
Containers Sealed?	YES	NO
Describe _____		

