

SAMPLE CHAIN OF CUSTODY

Report To _____
 Company _____
 Address _____
 City, State, ZIP _____
 Phone _____ Email _____

SAMPLERS <i>(signature)</i>	
PROJECT NAME & ADDRESS	PO #
NOTES:	INVOICE TO

Page # _____ of _____

TURNAROUND TIME
<input type="checkbox"/> Standard <input type="checkbox"/> RUSH
Rush charges authorized by: _____
SAMPLE DISPOSAL
Default: Clean following final report delivery
Hold (Fee may apply): _____

Sample Name	Lab ID	Canister ID	Flow Cont. ID	Reporting Level: IA=Indoor Air SG=Soil Gas (Circle One)	COLLECTION INFORMATION					ANALYSIS REQUESTED					PID Reading	Notes
					Date Sampled	Init. Vac. ("Hg)	Field Initial Time	Final Vac. ("Hg)	Field Final Time	MA-APH	BTEXN	CVOCs	Full List VOCs	Helium		
				IA / SG												
				IA / SG												
				IA / SG												
				IA / SG												
				IA / SG												
				IA / SG												
				IA / SG												
				IA / SG												

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 Fax (206) 283-5044

SIGNATURE	PRINT NAME	COMPANY	DATE	TIME
Relinquished by:				
Received by:				
Relinquished by:				
Received by:				