

CHAIN OF CUSTODY Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Pace Analytical™

www.pacelabs.com

625144

Required Client Information: Section A

Company: **ATC Associates Inc**
 Address: **104 E 25th Street**
10th floor
NY, NY 10010
 Phone: **212.353.8280** Fax: **212.353.8306**

Required Client Information: Section B

Report To: **James Cohn**
 Copy To:
 Invoice To:
 P.O.:
 Project Name: **PS 234M**
 Project Number: **19125-0279**

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To Be Completed by Pace Analytical and Client Section C

Quote Reference:
 Project Manager:
 Project #: **1058087**
 Profile #: **9353**
 Requested Analysis:

ITEM #	Section D Required Client Information:										MATRIX CODE	DATE COLLECTED mm / dd / yy	TIME COLLECTED hh:mm / p	# Containers	Preservatives								Dioxin	Remarks / Lab ID									
	SAMPLE ID														Unpreserved	H ₂ SO ₄	HNO ₃	HCl	NaOH	Na ₂ SO ₃	Methanol	Other											
	One character per box. (A-Z, 0-9 / -) Sample IDs MUST BE UNIQUE																																
1	A	T	C	-	0	5	1	4	-	2	3	4	M	-	D	X	1	WP	5/14/02	1 M ²											✓	1st floor Hall East	3579835
2	A	T	C	-	0	5	1	4	-	2	3	4	M	-	D	X	2	WP	5/14/02	1 M ²											✓	1st floor Hall East	✓ 843
3																																	
4																																	
5																																	
6																																	
7																																	
8																																	
9																																	
10																																	
11																																	
12																																	

SAMPLE CONDITION SAMPLE NOTES

Temp in °C: **20**
 Received on Ice: **Y/N**
 Sealed Cooler: **Y/N**
 Samples Intact: **Y/N**

Additional Comments:

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER:

SIGNATURE of SAMPLER:

DATE Signed: (MM / DD / YY)

ORIGINAL

SEE REVERSE SIDE FOR INSTRUCTIONS

Form CCO-01 Rev. 0001

CITY_21MC100_003030936