



fax: (610) 921-9667 or 921-8407

CHAIN OF CUSTODY

PC 209097

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		PO #	Quote #
Report Results To:	Name	Fred Burkhardt	
	Company	ARC Associates	
	Mailing Address	104 East 25 th St	
	City	KY	State KY ZIP 10010
	Telephone #		Fax #
Submit Invoice To:	Name		
	Company	SAMS	
	Mailing Address		
	City	State	ZIP
	Telephone #		Fax #
		Credit Card Info (include exp. date)	

JOB ID: 125 Cedar Street

ANALYSIS REQUESTED

Use attachments if necessary.

Please specify method requirements.

Preservatives Key:

A = Ascorbic Acid

C = HCl N2 = NaS2O3

H = HNO3 S = H2SO4

$I = 10e$ $Z = ZnAcetate$

N = NaOH X = None

O = Other:

Sampled by:	Sampling Location (Specify State):
Due Date:	(Rush TAT requires Lab approval)

REPORTING REQUIREMENTS (Circle all that apply)

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Full Data Package	Reduced Deliverables Package	Electronic Data Deliverables
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LIST	NPDOS	MIPP	RCRA	Stormwater	DEP (PWS #)
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[illegible]

(1) Relinquished by:	Date	Time	(2) Received by:	Date	Time	(3) Relinquished by:	Date	Time
(4) Received by:	Date	Time	(5) Relinquished by:	Date	Time	(6) Received at Lab:	Date	Time

Method of Delivery: ☒ UPS ☐ FED-EX ☐ PAS Courier ☐ Client ☐ US Mail ☐ Other