



CHAIN-OF-CUSTODY / Analytical Request Document

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

Required Client Information: Section A Company: ATC Associates Inc Address: 104 E 25th Street 10th floor New York NY 10010 Phone: 212.353.8280 Fax: 212.353.8206		Required Client Information: Section B Report To: James Cohn Copy To: _____ Invoice To: _____ P.O.: _____ Project Name: PS 150M Project Number: 19125-0289		Page: 1 of 1		611675 Section C	
		Client Information (Check quote/contract): Requested Due Date: _____ *TAT: _____ * Turn around times less than 14 days subject to laboratory and contractual obligations and may result in a Rush Turnaround Surcharge. Turn Around Time (TAT) in calendar days.		To Be Completed by Pace Analytical and Client Quote Reference: _____ Project Manager: _____ Project #: 1055250 Profile #: _____ Requested Analysis: _____			

ITEM #	Section D Required Client Information:										Valid Matrix Codes	DATE COLLECTED	TIME COLLECTED	# Containers	Preservatives								Remarks / Lab ID									
	SAMPLE ID														MATRIX	CODE	Unpreserved	H ₂ SO ₄	HNO ₃	HCl	NaOH	Na ₂ S ₂ O ₃		Methanol	Other							
	One character per box. (A-Z, 0-9 / -)																															
	Sample IDs MUST BE UNIQUE																															
1	A	T	C	-	0	3	1	5	-	1	5	0	M	-	D	X	1	WP	3/15/02	1 M ²										✓	Main Lobby floor	3398996
2	A	T	C	-	0	3	1	5	-	1	5	0	M	-	D	X	2	WP	3/15/02	Blank										✓	Blank	3399002
3																																
4																																
5																																
6																																
7																																
8																																
9																																
10																																
11																																
12																																

SHIPMENT METHOD	AIRBILL NO.	SHIPPING DATE	NO. OF COOLERS	ITEM NUMBER	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME
Fed ex		3/18/02						<i>[Signature]</i>	3/18/02	10:20

SAMPLE CONDITION	SAMPLE NOTES
Temp in °C	pls. include The Blank with all The samples for The other school
Received on Ice	
Sealed Cooler	
Samples Intact	

SAMPLER NAME AND SIGNATURE	
PRINT Name of SAMPLER:	WAGDI
SIGNATURE of SAMPLER:	<i>[Signature]</i>
DATE Signed (MM/DD/YY)	3/18/02

CITY_21MC100_003068183