

Pace Analytical

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CHAIN OF CUSTODY / Analytical Request Document

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

625144

Required Client Information: Section A

Company: **ATC Associates, Inc.**
 Address: **104 E 25th Street**
10th Floor
 Phone: **212-357 2286** Fax: **212-357 8326**

Required Client Information: Section B

Report To: **James Cohn**
 Copy To:
 Invoice To:
 P.O.:
 Project Name: **Stuyvesant HS**
 Project Number: **19125-0246**

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To Be Completed by Pace Analytical and Client Section C

Quote Reference:
 Project Manager:
 Project #: **1057132**
 Profile #: **7353 Line 1**
 Requested Analysis:

ITEM #	Section D Required Client Information:										MATRIX CODE	DATE COLLECTED mm/dd/yy	TIME COLLECTED hr:min:sec	# Containers	Preservatives								Remarks / Lab									
	SAMPLE ID One character per box. (A-Z, 0-9 / -) Sample IDs MUST BE UNIQUE														Unpreserved	H ₂ SO ₄	HNO ₃	HCl	NaOH	Na ₂ S ₂ O ₃	Methanol	Other										
1	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	2	OT	4/27/02	Bulk										✓	WAGDI VAC II	351334
2	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	3	OT												✓	WAGDI VAC II	352
3	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	4													✓	WAGDI VAC II	361
4	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	5													✓	WAGDI VAC I	371
5	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	6													✓	WAGDI VAC I	381
6	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	7													✓	WAGDI VAC I	39
7	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	8													✓	WAGDI VAC I	401
8	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	1	9													✓	WAGDI VAC I	41
9	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	2	0													✓	WAGDI VAC I	42
10	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	2	1													✓	WAGDI VAC I	43
11	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	2	2													✓	WAGDI VAC I	44
12	A	T	C	-	0	4	2	7	-	S	T	Y	-	D	X	2	3													✓	WAGDI VAC I	45

SHIPMENT METHOD	AIRBILL NO.	SHIPPING DATE	NO. OF COOLERS	ITEMS NUMBER	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME
Fed ex										

SAMPLE CONDITION SAMPLE NOTES

Temp in °C: **16**
 Received on Ice: **Y/N**
 Sealed Cooler: **Y/N**
 Samples Intact: **Y/N**

Additional Comments:

ORIGINAL

ORIGINAL

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER:

SIGNATURE of SAMPLER:

DATE Signed (MM/DD/YY)

4/27/02

SEE REVERSE SIDE FOR INSTRUCTIONS

Form CDD-100-1

CITY_21MC100_002867968

