



PSC Analytical Services

4418 Pottsville Pike

Reading, PA 19605

phone: (610) 921-8833

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CHAIN OF CUSTODY

PSC Work Order #

R02050414

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Report Results To:	PO #	Quote #	
	Name	James Cohn	
	Company	ATC Associates Inc	
	Mailing Address	104 E 25th Street, 10th floor	
	City	State	ZIP
Submit Invoice To:	City	State	ZIP
	Telephone #	Fax #	
	Credit Card Info (include exp. date)		
	Name		
	Company		
Mailing Address			
City			
State			
ZIP			
Telephone #			
Fax #			
Credit Card Info (include exp. date)			
Sampled by: <u>WAGDI</u> Sampling Location (Specify State):			
Due Date: (Rush TAT requires Lab approval)			
REPORTING REQUIREMENTS (Circle all that apply)			
Full Data Package Reduced Deliverables Package Electronic Data Deliverables			
UST NPDES MIPP RCRA Stormwater DEP (PWS #)			
ITEM #	SAMPLE DESCRIPTION (ID must match container labels)	Final Air Volume (L or min)	Matrix Type
			Date Time
1	ATC-0509-89M-DW10	14400	AIR 5/9/02 24 hrs
2			
3			
4			
5			
6			
7			
8			
9			
10			
(1) Relinquished by: <u>Wagdi</u> 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: <u>St. Baiter</u> Date Time <u>5/10/02 11 AM</u>			

JOB ID: 19125-0297

ANALYSIS REQUESTED

Use attachments if necessary.

Please specify method requirements.

Preservatives Key:

A = Ascorbic Acid

C = HCl

N2 = NaS2O3

H = HNO3

S = H2SO4

I = Ice

Z = ZnAcetate

N = NaOH

X = None

O = Other:

Preservatives (See above Key; list all that apply)

Type (P=Plastic, G=Glass, A=Air)

Container Volume (Liter, etc)

Number of Containers

1st floor, Hall outside
Cafeteria

Method of Delivery: UPS

FED-EX

PAS Courier

Client

US Mail

Other