



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
New York NY 10010
Phone: **212.353.8280** Fax: **212.353.8366**

Required Client Information: Section B

Report To: **James Cohn**
Copy To:
Invoice To:
P.O.:
Project Name: **M833**
Project Number: **19125-0291**

Page: **1** of **1**

To Be Completed by Pace Analytical and Client Section C

Quote Reference:
Project Manager:
Project #: **1056896**
Profile #:
Requested Analysis:

ITEM #	Section D Required Client Information:													MATRIX CODE	DATE COLLECTED mm / dd / yy	TIME COLLECTED hh: mm a/p	# Containers	Preservatives							Remarks / Lab ID												
	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											
	Valid Matrix Codes ← MATRIX CODE WATER WT SOIL SL OIL CL WIPE WP AIR AR TISSUE TS OTHER QT																																				
1	A	T	C	-	0	4	2	7	-	M	8	3	3	-	D	X	1							WP	4/27/02	1 m 2								✓	Main Lobby	3499836	
2	A	T	C	-	0	4	2	7	-	M	8	3	3	-	D	X	2																	✓	5th floor Bystander	844	
3	A	T	C	-	0	4	2	7	-	M	8	3	3	-	D	X	3																✓	10th floor Bystander	851		
4																																					
5																																					
6																																					
7																																					
8																																					
9																																					
10																																					
11																																					
12																																					

SHIPMENT METHOD	AIRBILL NO	SHIPPING DATE	NO. OF COOLERS	RELINQUISHED BY	AFFILIATION	DATE	TIME	ACCEPTED BY	AFFILIATION	DATE	TIME
Fedex		4/29/02						Begun Refs		4-30	1500

SAMPLE CONDITION	
Temp in °C	15
Received on Ice	Y/N
Sealed Cooler	Y/N
Samples Intact	Y/N

Additional Comments:

SAMPLE NOTES

pls use the Blank
of 150

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER:

WAGDI

SIGNATURE of SAMPLER:

[Signature]

DATE Signed: (MM / DD / YY)

4/27/02