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| **Report To Information****Company Name:**      **Contact Name:**       | **Bill To Information** (If different from report to)**Company Name:**      **Contact Name:**        | **Project Name / Number**           |
| **Address:**     **City**      **State**    **Zip**       | **Address:**     **City**       **State**    **Zip**       | **Task Number** (Lab Use Only) |
| **Phone:**      | **Phone:**       |
| **Email:**       | **Email:**       |
| **Sample Collector:**       | **PO No.:** |
| **Sample Collector Phone:**       |

 

**Chain of Custody Form**

**Commerce City Lab**

**10411 Heinz Way**

**Commerce City CO 80640**

**Lakewood Service Center**

**610 Garrison St, Unit E**

**Lakewood CO 80215**

**Phone: 303-659-2313**

**www.coloradolab.com**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sample Matrix (Select One Only)** | No. of Containers | Grabor (Check One Only)Composite |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| **Waste Water** **[ ]** **Ground Water** **[ ]** **Surface Water** **[ ]**  | **Soil [ ]** **Sludge [ ]**  | **Drinking Water [ ]**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Date** | **Time** | **Sample ID** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|       |       |  |      | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       |       |  |       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       |       |  |       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
|       |       |  |       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
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| **Instructions**: | **C/S Info:****Deliver Via:** **C/S Charge** **[ ]**  | **Seals Present Yes** **[ ]  No** **[ ]** **Temp. °C/Ice Sample Pres. Yes** **[ ]  No** **[ ]**  |
| **Relinquished By:** | **Date/Time:** | **Received By:** | **Date/Time:** | **Relinquished By:** | **Date/Time:** | **Received By:** | **Date/Time:** |

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|  **Tests Requested** |