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WATER SAMPLE CHAIN OF CUSTODY FORM

Company: _____ Telephone # _____ Fax #: _____
 Contact: _____ Client Project Number: _____
 Relinquished by: _____ Date: _____ Time: _____
 Written Report To: _____
 Project Name: _____
 Turn-Around (Circle One): Same Day 24 Hour 2-3 Day 4-5 Day Weekend Rush After Hour Rush

For Laboratory Use Only

MSE Project # MSE- _____ Method: EPA # 600/ 4-83-043, 100.2
 Samples Received by: _____ Date: _____ Time: _____

Client Sample Number	Location	Sample Description	Sampled By

Results Transmitted/Date: _____ Fax/Phone By: _____