Client _____

Address _____

_____
City State Zip

Phone _____ Fax _____

Contact _____

E-mail _____

Project Name _____

Project Number/P.O.# _____

Sampler Name _____

AMERICAN WEST ANALYTICAL LABORATORIES
463 West 3600 South
Salt Lake City, Utah 84115
(801) 263-8686
(888) 263-8686
Fax (801) 263-8687
Email:awal@awal-labs.com

CHAIN OF CUSTODY

Lab Sample Set # _____

Page _____ of _____

Turn Around Time (Circle One)

1 day 2 day 3 day 4 day 5 day Standard

Sample ID	Date/Time Collected	Matrix	Number of Containers (Total)	TESTS REQUIRED	QC LEVEL	COMMENTS
					1 2 2+ 3 3+ 4	

LABORATORY USE ONLY

SAMPLES WERE:

1 Shipped or hand delivered
Notes:

2 Ambient or Chilled
Notes:

3 Temperature _____

4 Received Broken/Leaking (Improperly Sealed)
Y N
Notes:

5 Properly Preserved
Y N
Checked at Bench
Y N
Notes:

6 Received Within Holding Times
Y N
Notes:

COC Tape Was:

1 Present on Outer Package
Y N NA

2 Unbroken on Outer Package
Y N NA

3 Present on Sample
Y N NA

4 Unbroken on Sample
Y N NA

Discrepancies Between Sample Labels and COC Record?
Y N
Notes:

Relinquished By: *Signature*	Date	Received By: *Signature*	Date
PRINT NAME	Time	PRINT NAME	Time
Relinquished By: *Signature*	Date	Received By: *Signature*	Date
PRINT NAME	Time	PRINT NAME	Time
Relinquished By: *Signature*	Date	Received By: *Signature*	Date
PRINT NAME	Time	PRINT NAME	Time
Relinquished By: *Signature*	Date	Received By: *Signature*	Date
PRINT NAME	Time	PRINT NAME	Time

Special Instructions: