CHAIN OF CUSTODY RECORD

Page_____ of _____

Client:

Contact:

Address:

Phone Number:

Email:

NOTES:

1) Ensure proper container packaging.

2) Ship samples promptly following collection.

3) Designate Sample Reject Disposition.

PO#

Project Name:

Table 1. – Matrix Type
1 = Surface Water, 2 = Ground Water
3 = Soil/Sediment, 4 = Rinsate, 5 = Oil
6 = Waste, 7 = Other (Specify) _____

FOR GAL USE ONLY

GAL JOB #

_____

Samplers Signature:

Lab Name: Green Analytical Laboratories (970) 247-4220 FAX (970) 247-4227

Address: 75 Suttle Street, Durango, CO 81303 www.greenanalytical.com

Sample ID	Collection		Miscellaneous				Preservative(s)						Analyses Required									Comments
	Date	Time	Collected by: (Init.)	Matrix Type From Table 1	No. of Containers	Sample Filtered ? Y/N	Unpreserved (Ice Only)	HNO3	HCL	H2SO4	NAOH	Other (Specify)										
1.																						
2.																						
3.																						
4.																						
5.																						
6.																						
7.																						
8.																						
9.																						
10.																						

Relinquished by:	Date:	Time:	Received by:	Date:	Time:
Relinquished by:	Date:	Time:	Received by:	Date:	Time:

* Sample Reject: [ ] Return [ ] Dispose [ ] Store (30 Days)