



Galbraith Laboratories, Inc.

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Chain of Custody Record

Company/Project Name										Project Location		
Sample No. / Identification	Date and Time	Grab	Comp	Sample Container (Size/Mat'l)	Sample Type (Liquid, sludge, etc.)	Preservation				Analysis Requested		Laboratory Remarks
						Preservative	Date	Time	Initial	Test	Method	
Samplers: <i>(Signature)</i>		Relinquished by: <i>(Signature)</i>			Date: _____ Time: _____		Received by: <i>(Signature)</i>			Date: _____ Time: _____		Intact: _____
		Relinquished by: <i>(Signature)</i>			Date: _____ Time: _____		Received by: <i>(Signature)</i>			Date: _____ Time: _____		Intact: _____
Affiliation:		Relinquished by: <i>(Signature)</i>			Date: _____ Time: _____		Received by: <i>(Signature)</i>			Date: _____ Time: _____		Intact: _____
REPORT TO:					COMMENTS:							