CONVERSE LABORATORIES, INC.
800 Starbuck Ave., Suite B101, Watertown, NY 13601
(315) 788-8388 www.converselabs.com

Chain of Custody

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Client Name:	Client Project ID / PO# :
Client Address:	

Matrix Codes
DW= Drinking Water
GW=Ground Water **WW**=Wastewater
SL=Sludge **SW**=Surface Water **SO**=Soil

Sample Information:
☐ Drilled ☐ Dug
☐ Finished ☐ Raw ☐ Other:_____
☐ Chlorinated ☐ UV

Phone #:	Cell #:
E-Mail address:	
Contact/Report to:	
Sampler:	

Preservative Codes
1= $Na_2S_2O_3$ 2= HCl 3= H_2SO_4
4= HNO_3 5= NaOH
6= Asorbic Acid 7= NH_4CL
8= Unpres. 9=_____

PLEASE NOTE:
Reports for businesses will be forwarded to your DOH.

NOTES TO LABORATORY
Normal TAT ☐
Rush TAT ☐
Date Needed: _____ a.m. / p.m.

Date Collected	Time Collected	Sample Identification	G = Grab C = Composite	Matrix - see codes above	Chlorine Residual	List Preservative Code Below 1	2	3	4	5	6	7	8	Subcontracted Y / N	ANALYSIS / TEST REQUESTED	SAMPLE ID # (lab use only)

Relinquished by:	Date	Time	Received by:	Date	Time	Rec'd Temp°	ICED?	AUTHORIZED RECIPIENTS & CONTACT INFO.
							Yes / No	
							SAMPLE(S) AS RECEIVED CONFORM TO NELAC STANDARDS *If no, see attached sheet	
							YES NO	

Amt. Due: _____ **Amt. Paid:** _____

Cash _____ **Check#** _____ **CC** _____

Initial Review: _____
Transcriptual Rev.: _____
Final Review: _____