

## Harrens Lab Inc.

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## **General Sample Submission Form (Chain of Custody)**

Company Name				Submitted by: Phone #:						Submitted Date
			]	Report to:		Phone #:			Email:	
Sample Name Sample Description			Batch No.	Туре	of Test Request	Requested		Turnaround Time	Harrens Lab Sample ID	
									Routine Rush	
									Routine Rush	
									Routine Rush	
									Routine Rush	
									Routine Rush	
									Routine Rush	
									Routine Rush	
									Routine Rush	
									Routine Rush	
									Routine Rush	
After Analysis: Dispose of Sample Return Unused Sample Retain Sample for more than 30 days										
*Please contact Harrens Lab at 510-887-8885 if you need assistance in choosing the appropriate analysis or to confirm the availability, scheduling, and the cost of RUSH services.										
Harrens Lab Inc. Use Only										
preture:	: Condition Upon Receipt:				Ship Via:				Due Date:	
mbient	Seal Damaged?			□N	☐ UPS ☐ DHL ☐ FEDEX					
efrigerated	Container Damaged? \[ \sum \cdot \cd		☐ Y	□N	☐ MAIL ☐ MSG ☐ IN PERSON Inv		Invoice Numbe	Invoice Number:		
rozen	Sample(s)	Leaking?	☐ Y	□ N	Tracking Number:					
Additional Comments:  Received By: Date & Time:										
	Sample N  Sample N  Analysis:	Sample Name  Sample Name  Analysis: Dispose of S. Return Unus Retain Samp se contact Harrens Lab at 510-8  Preture: Condition Seal Dama efrigerated Container Sample(s)	Sample Name    Sample Description	Sample Name    Sample   Description	Report to:    Sample Name	Report to:    Report to:   Repo	Report to: Phon    Sample   Batch   No.   Type of Test Requests	Report to: Phone #:    Report to: Phone #:	Report to: Phone #:    Sample   Sample   Description   Batch   No.   Type of Test Requested   Sample   Size	Report to: Phone #: Email:    Sample Name