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CHAIN OF CUSTODY RECORD

LOCATION:				SAMPLER:		
SAMPLE NO.	LOCATION	DATE	TIME	SAMPLE TYPE	NO. OF CONT'S	ANALYSIS REQUIRED

RELINQUISHED BY: _____ RECEIVED BY: _____ DATE: _____ TIME: _____

RELINQUISHED BY: _____ RECEIVED BY: _____ DATE: _____ TIME: _____

RECEIVED FOR LABORATORY BY: _____ DATE: _____ TIME: _____

METHOD OF SHIPMENT: _____ DATE: _____ TIME: _____