

Texas Analytical Laboratories, Inc.

CHAIN OF CUSTODY

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Project #					No. of Contai ners	Analysis								Report and Bill To:			
Project Name						/ / / / / / / / / / / / / / / /								Remarks			
Sampler (signature Please)																	
Sample #	Collec date	Callec Time	Grab	Comp	Sample description												
:Relinquished By(sign)			Date	Time	Received By: (Sign)	Date	Time	Not: Relinquisher agrees to pay for disposal of excess sample									
:Relinquished By(sign)			Date	Time	Received By: (Sign)	Date	Time	Sample Condition(s):	Temp:	pH:	Preservative:	Packing condition :					

