www.qal.net

LAB USE ONLY	Date:	
Lab ID	Analysis Code	Quantity

Submittal Form / Chain of Custody (Rev. 200129)

Contact Information	Billing Information
Company:	Contact:
Contact/Rep:	Address:
Address:	Phone:
	Email:
Phone:	*Please send invoice via:* ❑Email ❑Fax
Email Address:	**PROMO CODE: BYE2020!** *(offer expires 1/31/21)*

Please copy results to the following email addresses:	**Purchase Order:**
Cc:	Project Name:
Cc:	Check if your account has a credit card on file: ❑

Sample Description *(please label samples to match)*	**Sampled** *(date/time)*	**Matrix** *(media, soil, tissue, water, fert, other)*	**Analysis Request** *(reference service code if possible)*

Chain of Custody

Relinquished by:	Date:	Time:	Received by:	Date:	Time:
Relinquished by:	Date:	Time:	Received by QAL:	Date:	Time:
Shipping Details & Tracking #:					

Send Samples to: 2814 W. 15th Street, Panama City, FL 32401
(P) 850-872-9595 (F) 850-872-9535
WWW.QAL.NET