Laboratory Name: _____

Submitted By: _____
Address: _____
Telephone: _____

ANALYSES REQUESTED

Sample Collection					Field Sample ID (include reference to matrix type)	Grab / Composite	Preservative: None = N, H2SO4 = A, HNO3 = B	pH Verified at laboratory	BOD$_5$	Total Suspended Solids	Ammonia Nitrogen	Total Dissolved Solids	Chloride	Total Phosphorus					LabSample ID
Start Date	Start Time	End Date	End Time	Collector															

Relinquished By:	Date:	Time:	Received By:	Date:	Time:
Relinquished By:	Date:	Time:	Received By:	Date:	Time:
			Temperature on receipt (ROI or Temp) =		