

# The Truman Lab



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## Chain of Custody

Client Name:		Client Phone:		Client Email:		Client Address:			
Sampler Name:		Hand-Delivered?	Matrix Code: Surface Water = SW Drinking Water = DW Waste Water = WW Soil = SO Other = O		Sample Type (ST): Grab = GS Composite = CS Modified = MS Other = O	Container Type (CT): Plastic = P Glass = G Other = O	LAB USE ONLY Sample Batch Number:		
Sampler Signature:		Mailed?							
Sample Order #	Collection Date	Collection Time	Collection Location / Site Number	Matrix Code	Analysis Requested		Unique Sample Number	Preservative	ST / CT
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
1. Relinquished By:		1. Received By:		Date:	Time:	Comments:		Approved By:	
2. Relinquished By:		2. Received By:		Date:	Time:				

## Instructions

- 1) The patterned boxes shall be completed by laboratory staff. Non-patterned boxes shall be completed by the sampler. When samples change custody, the **Relinquished By** and **Received By** sections must be completed by both parties exchanging the samples. If two samples are **Duplicates** of each other, circle the **Sample Order #** of both samples on this form.
- 2) If the **Collection Location** is different from the provided **Client Address** and a **Site Number** is not prefilled, list the **Coordinates** of the sampling location (if available).
- 3) Using a permanent marker, label each sample container with the **Sample Order #** (if a **Unique Sample Number** is not prefilled), **Date**, and **Time** of collection. Circle the **Sample Order #** on the container. Initial the bottle cap. For example, the first sample collected will be labeled "1", circled, and this sample information will correspond with the other sections on this form for **Sample Order #1**. The sample will be labeled by laboratory staff with the **Unique Sample Number** upon receipt at the laboratory.