

1 of 2

CHAIN-OF-CUSTODY/TEST REQUEST FORM

No 4169

Project/Client Name: AOC5 MR Phase 1Ship to: ARLProject Number: 210075.0102Attn: Sue DunnihooShipping Date: 4-11-2023Contact Name: Amanda VandermortShipper: hand del'dAirbill Number: —Sampled By: WindwardForm filled out by: TDOTurnaround requested: Std.

Sample Collection Date (m/d/y)	Time	Sample Identification	Volume of Sample / # of Containers	Matrix	Test(s) Requested (check test(s) required)								Comments / Instructions [Jar tag number(s)]
					PCBs	SUS SVOLs	SUS metals	TOC / TS	D/C	Archive	CPAHs	Aspen L	
04.11.23	1321	LDW23-SS109B	4	SETBACK	X	X	X	X		X			
	1400	LDW23-SS1071	4		X	X	X	X	X	X			
	1402	LDW23-IT1071	4		X			X	X	X	X	X	
	1418	LDW23-SS107B	4		X	X	X	X		X			
	1438	LDW23-SS1067	4										
	1440	LDW23-IT1067	4		X		X	X		X	X	X	
	1505	LDW23-SS1807	4		X	X	X	X		X			
	1507	LDW23-IT1807	4		X			X		X	X	X	
	1530	LDW23-SS1055	4		X	X	X	X		X			
	1532	LDW23-IT1055	4		X			X		X	X	X	
	1543	LDW23-SS1050	4										
✓	1545	LDW23-IT1050	4		X			X		X	X	X	
Total Number of Containers			40	Purchase Order / Statement of Work # <u>APJ-110222-AOC5-ARL</u>									

1) Released by:	1) Rec'd by: <u>Jacob Leitter</u>	2) Released by:	2) Rec'd by:
Print name: <u>Suzanne Replinger</u>		Print name:	
Signature: <u>[Signature]</u>	Company: <u>AR, LLC</u>	Signature:	Company:
Company: <u>Windward Env</u>		Company:	
Date/Time: <u>4-11-2023 1750</u>	Date/Time: <u>4/11/23 1717</u>	Date/Time:	Date/Time:

* Distribution: White copies accompany shipment; yellow retained by consignor.

200 1st Ave W, Suite 500
Seattle, WA 98119

206.378.1364



To be completed by Laboratory upon sample receipt:

Date of receipt::	Laboratory W.O. #:
Condition upon receipt:	Time of receipt:
Cooler temperature:	Received by:

Date of receipt::	Laboratory W.O. #:
Condition upon receipt:	Time of receipt:
Cooler temperature:	Received by: