

1 of 2

CHAIN-OF-CUSTODY/TEST REQUEST FORM

No 3437

Project/Client Name: AOC5 MR Phase 1
 Project Number: 210075.01.02
 Contact Name: Amaria Vanderhoff
 Sampled By: Windward

Ship to: ARL
 Attn: Sue Durnitho
 Shipper: Canner
 Form filled out by: K. McPeck
 Shipping Date: 1/5/13
 Airbill Number:
 Turnaround requested: SLD.

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	SMS SVOCs	SMS metals	TAC / Total Solids	D/F	Archival	
1/5/13	0815	LD4123-SS1276	4	Sediment	X	X	X	X	NA	X	
	0815	-SS1276-FD			X	X	X	X	NA	X	
	0835	-SS1270			X	X	X	X	NA	X	
	0835	-SS1270-FD			X	X	X	X	NA	X	
	0857	-SS1265			X	X	X	X	NA	X	
	0857	-SS1265-FD			X	X	X	X	NA	X	
	0915	-SS1247			X	X	X	X	NA	X	
	0915	-SS1247-FD			X	X	X	X	NA	X	
	0951	-SS1226			X	X	X	X	X	X	
	1007	-SS1225			X	X	X	X	NA	X	
	1007	-SS1225-FD			X	X	X	X	NA	X	
	1030	-SS1221			X	X	X	X	NA	X	
Total Number of Containers			48	Purchase Order / Statement of Work # <u>APTJ-110222-AOC5-ARL</u>							

1) Released by:	1) Rec'd by:	2) Released by:	2) Rec'd by:
Print name: <u>Amaria Vanderhoff</u>	<u>[Signature]</u>	Print name: <u>YAN F.D.</u>	
Signature: <u>[Signature]</u>	Company: <u>ASPECTY</u>	Signature: <u>[Signature]</u>	Company:
Company: <u>Windward</u>	Date/Time: <u>1/5/13 4:05</u>	Company: <u>1/5/13</u>	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:

2 of 2

CHAIN-OF-CUSTODY/TEST REQUEST FORM

112 3438

Project/Client Name: AOC5 MR Phase 1
 Project Number: 210075.01.02
 Contact Name: Amara Vandervort
 Sampled By: Windward

Ship to: ARL
 Attn: Sve Dunnahoo Shipping Date: 1/5/23
 Shipper: Couner Airbill Number:
 Form filled out by: K. McPeak Turnaround 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	SMS SVOCs	SMS metals	TPC / TSS Solids	D/F	Archive		
1/5/23	1048	LOW23-SS1220	4	Sediment	X	X	X	X	NA	X		
	1146	-SS1214			X	X	X	X	NA	X		
	1202	-SS1208			X	X	X	X	NA	X		
	1219	-SS1207			X	X	X	X	NA	X		
	1234	-SS1193			X	X	X	X	NA	X		
	1250	-SS1184			X	X	X	X	NA	X		
	1306	-SS1182			X	X	X	X	NA	X		
	1335	-SS1175			X	X	X	X	NA	X		
	1357	-SS1154			X	X	X	X	X	X		
	1433	-SS1149			X	X	X	X	NA	X		
	1452	-SS1130			X	X	X	X	NA	X		
Total Number of Containers			44	Purchase Order / Statement of Work # <u>APT-110222-AOC5-ARL</u>								

1) Released by:	1) Rec'd by:	2) Released by:	2) Rec'd by:
Print name: <u>Amara Vandervort</u>	<u> </u>	Print name:	
Signature: <u>[Signature]</u>	Company:	Signature:	Company:
Company: <u>Windward</u>		Company:	
Date/Time: <u>1/5/23 1605</u>	Date/Time: <u>1/5/23 4:05</u>	Date/Time:	Date/Time:

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



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To be completed by Laboratory upon sample receipt:

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