

# CHAIN-OF-CUSTODY/TEST REQUEST FORM

1 of 2

3439

Project/Client Name: ARCS MR Phase 1  
 Project Number: 210075-01-02  
 Contact Name: Angela Verdunovet  
 Sampled By: Whitaker

Ship to: ARL  
 Attn: Sue Dunnehan  
 Shipper: Council  
 Form filled out by: R. Murphy  
 Shipping Date: 11/6/23  
 Airbill Number: ---  
 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	SIDS	SMS	metals	TC / 1001 metals		D/F	Archive
1/6/23	0828	LOW23-SS1205	4	Sediment	X	X	X	X	X	X	NA	X	
	0936	-SS1188			X	X	X	X	X	X	NA	X	
	0952	-SS1179			X	X	X	X	X	X	NA	X	
	1104	-SS1142			X	X	X	X	X	X	NA	X	
	1122	-SS1173			X	X	X	X	X	X	NA	X	
	1141	-SS1160			X	X	X	X	X	X	X	X	
	1229	-SS1152			X	X	X	X	X	X	NA	X	
	1243	-SS1131			X	X	X	X	X	X	NA	X	
	1257	-SS1129			X	X	X	X	X	X	NA	X	
	1315	-SS1124			X	X	X	X	X	X	NA	X	
	1329	-SS1123			X	X	X	X	X	X	NA	X	
	1344	-SS1116			X	X	X	X	X	X	NA	X	
Total Number of Containers					48								
					Purchase Order / Statement of Work # APT-110222-ARCS-ARL								

1) Released by:		2) Rec'd by:	
Print name:	<u>Angela Verdunovet</u>	Print name:	<u>YARE</u>
Signature:	<u>[Signature]</u>	Signature:	<u>[Signature]</u>
Company:	<u>Windward</u>	Company:	<u>VA VA SAFETY</u>
Date/Time:	<u>11/6/23 1703</u>	Date/Time:	<u>11/6/23 4:55</u>

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

To be completed by Laboratory upon sample receipt:

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

200 1st Ave W, Suite 500  
 Seattle, WA 98119  
 206.378.1364



