

CHAIN-OF-CUSTODY/TEST REQUEST FORM

3441

of

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Project/Client Name: LDW ADCS MR Phase 1 Ship to: ARL
 Project Number: 210075-01.02 Attn: Sue Dinnibee Shipping Date: 1-11-2023
 Contact Name: Amara Vandervort Shipper: Conner Airbill Number: ---
 Sampled By: Windward Form filled out by: S. Ruppinger Turnaround requested: STL

Sample Collection Date (m/d/y)	Time	Sample Identification	Volume of Sample / # of Containers	Matrix	Test(s) Requested (check test(s) required)						Comments / Instructions (for tag number(s))
					PCBs	SMS SVOCs	SMS Metals	TOC/Totals	Dioxins/Furans	Archive	
1-11-2023	0825	LDW23-SS1021	4	Sediment	X	X	X	X	NA	X	
	0837	LDW23-SS1015	4		X	X	X	X		X	
	0918	LDW23-SS1164	4		X	X	X	X		X	
	0935	LDW23-SS1158	4		X	X	X	X		X	
	0950	LDW23-SS1151	4		X	X	X	X		X	
	1007	LDW23-SS1145	4		X	X	X	X		X	
	1020	LDW23-SS1139	4		X	X	X	X		X	
	1040	LDW23-SS1117	4		X	X	X	X		X	
	1115	LDW23-SS1103	4		X	X	X	X		X	
	1128	LDW23-SS1100	4		X	X	X	X		X	
	1143	LDW23-SS1096	4		X	X	X	X		X	
	1219	LDW23-SS1094	4		X	X	X	X		X	
Total Number of Containers					48	Purchase Order / Statement of Work # <u>APT-110222-ACCS-ARL</u>					

1) Released by: <u>Amara Vandervort</u>	2) Released by: _____
Print name: <u>Amara Vandervort</u>	Print name: _____
Signature: <u>[Signature]</u>	Signature: _____
Company: <u>Windward</u>	Company: _____
Date/Time: <u>1/11/23 16:45</u>	Date/Time: _____

* 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

Windward
 environmental LLC

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Project/Client Name:	LOW AUCS MR Phase 1	Ship to:	ARL
Project Number:	210075-01.02	Attn:	Sue Dunbar
Contact Name:	Annava Vandervort	Shipper:	CALIF
Sampled By:	Windward	Shipping Date:	1.11.2023
		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 [for tag number(s)]
					PCBs	SMS SVOCs	SMS Metals	TOC / Total Solids	Dioxins/Furans	Arocloric	
1-11-2023	1240	LDW23-SS1066	4	Sediment	X	X	X	X	X	X	
1-11-2023	1303	LDW23-SS1061	4	Sediment	X	X	X	NA	X		
Total Number of Containers					8	Purchase Order / Statement of Work #					
					APT - 110222 - AOC5 - ARL						

1) Released by: _____
 Print name: Angela Vanderhoff
 Signature: [Signature]
 Company: Woodward

2) Rec'd by: _____
 Print name: _____
 Signature: _____
 Company: _____

Date/Time: 11/23 1645 Date/Time: 11/23 1645

To be completed by Laboratory upon sample receipt:

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

206.378.1364

Windward^{LLC}
environmental