

No 4290

Project/Client Name:

Ship to:

Project Number:

Attn:

Shipping Date:

Contact Name:

Shipper:

Airbill Number:

Sampled By:

Form filled out by:

Turnaround requested:

[illegible]

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

WindWard
environmental LLC

**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: