

Sampled By:

Form filled out by:

Turnaround requested:

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

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 First Avenue West
Suite 500
Seattle, WA 98119
Tel: (206) 378-1364