

1 of 3

## CHAIN-OF-CUSTODY/TEST REQUEST FORM

Tier 2  
No 4266

Project/Client Name:

AOC5 MR Phase 11

Project Number:

210075.0103

Contact Name:

Amara Vandervort

Sampled By:

Windward

Ship to:

ARL

Attn:

Sue Dunnahoo

Shipping Date:

5/15/24

Shipper:

Courier

Airbill Number:

Form filled out by:

AV/OS

Turnaround requested:

51d

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))
					Archive						
5/15/24	0906	LOW24-IT1516B	4	Sediment	X						
		IT1516C	4		X						
		IT1516D	4		X						
		IT1516E	4		X						
	0906	IT1516F	4		X						
	1105	SC1541A	4		X						
		SC1541B	4		X						
		SC1541E	4		X						
		SC1541G	4		X						
		SC1541J	4		X						
		SC1541K	4		X						
5/15/24	1105	LOW24-SC1541M	4	Sediment	X						
Total Number of Containers			48	Purchase Order / Statement of Work # ARJ-050224-AOC5-ARL							
1) Released by:			1) Rec'd by:		2) Released by:			2) Rec'd by:			
Print name: Amara Vandervort			DIX MHC L		Print name:						
Signature: [Signature]			Company: M DIX		Signature:			Company:			
Company: Windward					Company:						
Date/Time: 5/15/24 11020			Date/Time: 5/15/24 1120		Date/Time:			Date/Time:			

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

To be completed by Laboratory upon sample receipt:

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

206.378.1364

Date of receipt:

Laboratory W.O. #:

Condition upon receipt:

Time of receipt:

Cooler temperature:

Received by:

2 of 3

## CHAIN-OF-CUSTODY/TEST REQUEST FORM

No 4269

Tier 2

Project/Client Name: AOC5 MR Phase II  
 Project Number: 210075.01.03  
 Contact Name: Amara Vandervoort  
 Sampled By: Windward

Ship to: ARL  
 Attn: Sue Dunnahoo  
 Shipper: Courier  
 Form filled out by: AVLOS  
 Shipping Date: 5/15/24  
 Airbill Number: 1  
 Turnaround requested: Std

Sample Collection Date (m/d/y)	Time	Sample Identification	Volume of Sample / # of Containers	Matrix	Archive	Test(s) Requested (check test(s) required)						Comments / Instructions (Jar tag number(s))
5/15/24	1105	LOW24-SC1541N	4	Sediment	X							
<del>5/14/24</del>	<del>1516</del>	<del>SC1553</del>	<del>3</del>		<del>X</del>							
5/15/24	1001	LOW24-SC1535A	4	Sediment	X							
		SC1535D	4		X							
		SC1535F	4		X							
		SC1535H	4		X							
		SC1535J	4		X							
	1001	SC1535L	4		X							
	1148	SC1542A	4		X							
		SC1542D	4		X							
		SC1542F	4		X							
5/15/24	1148	LOW24-SC1542H	4	Sediment	X							
Total Number of Containers			44	Purchase Order / Statement of Work # APJ-050224-AOC5A3L								
1) Released by:		1) Rec'd by:		2) Released by:		2) Rec'd by:						
Print name: <u>Amara Vandervoort</u>		Mike L		Print name:								
Signature: <u>[Signature]</u>		Company: <u>DIK</u>		Signature:				Company:				
Company: <u>Windward</u>				Company:								
Date/Time: <u>5/15/24 1620</u>		Date/Time: <u>5/15/24 1620</u>		Date/Time:				Date/Time:				

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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:



Tier 2

51 d

Sample Collection Date (m/d/y)	Time	Sample Identification	Volume of Sample / # of Containers	Matrix	Archive	Test(s) Requested (check test(s) required)						Comments / Instructions [Jar tag number(s)]
5/15/24	1148	L0W24-SC1542J	4	Sediment	X							
↓	↓	SC1542L	4	↓	X							
5/15/24	1148	L0W24-SC1542M	4/3	Sediment	X							
		AV.										
		AV										
		5/15/24										
<b>Total Number of Containers</b>			18	<b>Purchase Order / Statement of Work # APJ-050224-AOCS-ARC</b>								

1) Released by: Amara Vandoorn/H

Print name:

Signature:

Company: Woodward

Date/Time: 5/15/24 11020

1) Rec'd by: AV Mike L

Company: OIX

Date/Time: 5/15/24 1020

2) Released by:

Print name:

Signature:

Company:

Date/Time:

2) Rec'd by:

Company:

Date/Time:

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

Windward  
environmental LLC

**200 1<sup>st</sup> 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: