

Check Box That Applies To Your Location

☐ Flowers Chemical Laboratories, Inc.

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Client FDEP		Project Name SMP - Martin		P.O. # RD-2018-05-21-24	
Address 2199 S. Rock Rd. Fort Pierce, FL		Client Contact		FAX	
(772) 448-5884		FCL Project Manager		E-MAIL	
Phone Jordan Skaggs		Requested Due Date 10 Day Standard OR ☐ MM ☐ DD ☐ YY		Rush Charges May Apply	
Sampled By (PRINT): <i>[Signature]</i>		Pick-Up Fee \$		Vehicle Surcharge \$	
Sampler Signature <i>[Signature]</i>		Date Sampled 07/25/2018		Sampling Fee \$	

ITEM NO.	SAMPLE ID	DATE	TIME	MATRIX	(LAB USE ONLY) LAB NO.	PRESERVATIVES					ANALYSES REQUEST	COMMENTS	Total # Containers
						NONE	H ₂ SO ₄	HNO ₃	HCl	Na ₂ S ₂ O ₃			
9	GZSE0015	07/25/18	13:00	SW	372872						X	Rec. @ 4.40	1
10	GZSE0018	"	13:30	SW	Sw 8						X		1
11	GZSE0017	"	13:50	SW	Sw 9						X		1
12	GZSE0032	"	14:10	SW	Sw 10						X		1
5												2 of 2	
6													
7													
8													
9													
10													

Relinquished By / Affiliation	Date	Time	Accepted By / Affiliation	Date	Time	Relinquished By / Affiliation	Date	Time	Accepted By / Affiliation	Date	Time
FDEP (JS)	07/25	1555	[Signature]	7/25	1555						

FINANCE CHARGES APPLIED TO PAST DUE INVOICES

• WHITE - Lab Copy - To Be Scanned

• YELLOW - Client Copy