

Client Name: FDEP
Address: 2600 Blair Stone Rd.
Tallahassee, FL, 32399
Phone: (850) 245-8085
Email: dep-overflowmicro@dep.state.fl.us

Bill to: Frances Moore
P.O. #: Lab B16970

Laboratory Submission #:

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Laboratory Sample Acceptability:
pH < 2.0 BEAS Temperature: 4.9°C

Instructions. Each bottle in the blood identification sample ID, unmeasured urea-nitrogen remained in the bottle. Sample vial, eluent ID, and parameters for analysis. Sample must be refrigerated or stored in wet ice after collection. The maximum temperature during storage should be 0 °C (44.0 °F). Other residues, as appropriate, are not required.

2. The following information should be added to each bottle label after collection with permanent black ink: date and time of collection, sampler's name or initials, and any field number or ID.
3. All bottles not containing preservative may be reused with appropriate sample prior to collection.

4. The client is responsible for documentation of the sampling events. Please note special sampling events on the sample custody form.

	Collector:	Date:	Time:	Received By:	Date:	Time:
1		6/10/19	1550		06/10/19	1550
2	Relinquished by: 	Date: 6/10/19	Time: 1550	Received By:	Date:	Time:
3	Relinquished by:	Date:	Time:	Received By:	Date:	Time:
4	Relinquished by:	Date:	Time:	Received By:	Date:	Time:
5	Relinquished by:	Date:	Time:	Received By:	Date:	Time: