

Sample Submission Form

	Customer Infor	mation													
Client Name:				Electronic documents will be provided in Adobe Acrobat (PDF) format.											
Client Email:				Customer Special Instructions:											
Company Name (Included on Report): Phone: Street Address: City, State, Zip:															
										Turn around time requested:				ine (3-5 days) Expedited (Contact Lab for Overnight rushes)	
					Completed	and signed sample submission form	_	· ·			guard to perform the re	quested analysis.			
Item#	Sample ID (Chemical Name)	Lot Number	Analyses Requeste				Expected		Include Photo						
			Panel: Puri		Bioburden (USP 61- 5 day TAT)	Concentration/	Additional Comments or Testing Requested	on Report? (Y/N)							
				Date Sampl			e(s) Relinquished:								
				Authoriz			ed Signature:								
Lab Use Only Lab Project #:				Sample Receipt											
Date/Time Received:		Due Date/Time:			Тетр	°C	Received By (print):								
Lab Notes:				Seals Intact Y N N/A				Received By (sign):							
				Damaged Y N											