



Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Drugs Chain of Custody

[ This Area For Lab Use Only ]

Job Number:		Job Name:				Mobile:		Email:	
Collector:						Note:			
Date Collected:									
Analysis Type						Turnaround		Accepted Media Types	
For analysis, enter <i>All</i> for a comprehensive screen, <i>Meth</i> for a methamphetamine test, or another specific drug of abuse for an individual test. See our website for a full list of analytes.						All mass spec reports delivered within 5 days of receipt		Isopropyl Alcohol Wipe: 100cm <sup>2</sup>	
#	Number	Sample	Analysis	Volume	Notes				
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22									
Released by:			Date:		Received By:			Date:	