

# APPENDIX A: CHAIN OF CUSTODY FORMS

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**CHAIN-OF-CUSTODY/TEST REQUEST FORM**

1306

Project/Client Name: POS/LDWG Ship to: ARI  
 Windward Project No: \_\_\_\_\_ Attn: Sue Dunphy Shipping Date: \_\_\_\_\_  
 Contact Name: Joanna Flower, Kathy Godfredsen Shipping address: hand delivered Airbill Number: \_\_\_\_\_  
 Sampled By: JMF

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)]	
					homogenize							
6/23/03	1025	LDW-MWb-W-WF-Comp1	1	tissue	X							Homogenize +
6/23/03	1025	LDW-MWb-W-WF-Comp2	↑	↑	↑							Protective Sample
6/23/03	1025	LDW-MWb-W-WF-Comp3										like previous.
6/23/03	0730	LDW-LWa-H-WF-Comp1										
6/23/03	0730	LDW-LWa-H-WF-Comp2										
6/23/03	0730	LDW-LWa-H-WF-Comp3										
6/23/03	0730	LDW-LWa-W-WF-Comp1										
6/23/03	0730	LDW-LWa-W-WF-Comp2										
6/23/03	0730	LDW-LWa-W-WF-Comp3										
6/23/03	1025	LDW-MW-H-WF-Comp1										
6/23/03	1025	LDW-MW-H-WF-Comp2										
6/23-24/03	NA	LDW-MW-H-WF-Comp3	↓	↓	↓							
6/18/03	1130	LDW-RM18-H-WF-Comp1	1	tissue	X							
Total Number of Containers				Purchase Order / Statement of Work #								

1) Released by: <u>Joanna Flower</u> Print name: <u>J. Flower</u> Signature: <u>[Signature]</u> Company: <u>Windward</u> Date/Time: <u>6/27/03 1705</u>	1) Rec'd by: <u>[Signature]</u> Company: <u>ARI</u> Date/Time: <u>6/27/03 1705</u>	2) Released by: <u>ERIC BRANSON</u> Print name: <u>Eric Branson</u> Signature: <u>[Signature]</u> Company: <u>ARI</u> Date/Time: <u>9/24/03 -1435</u>	1) Rec'd by: _____ Company: _____ Date/Time: _____
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\* Distribution: White and yellow copies accompany shipment; pink-consignor's copy; white-consignee return with results; yellow-consignee's copy.  
 \* Instructions for completion of Chain-of-Custody/Test Request Form on back.



• 200 West Mercer Street  
 Suite 401  
 Seattle, WA 98119  
 Tel: 206.378.1364  
 Fax: 206.217.0089

To be completed by Laboratory upon sample receipt:

Date of receipt:	Laboratory W.O.#:
Condition upon receipt:	Time of receipt: <u>9/24/03 9000</u>
Cooler temperature:	Received by: <u>[Signature]</u>

K2308006

1030747

1308

**CHAIN-OF-CUSTODY/TEST REQUEST FORM**

Project/Client Name: POS/LDWG  
 Windward Project No: 03-08-00-16  
 Contact Name: Joanna Floner  
 Sampled By: JMP

Ship to: ARI  
 Attn: Sue Dunn, HQD  
 Shipping address: hand delivered  
 Shipping Date: \_\_\_\_\_  
 Airbill Number: \_\_\_\_\_

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)]
					Organize	Archive					
6/19/03	1000	LDW-RM18-H-WF-Comp2	1	tissue	X						No more tissue tar chit like pre Hous samples
6/20/03	1030	LDW-RM18-H-WF-Comp3	1	↑	X						
6/18/03	1130	LDW-RM18-W-WF-Comp1	1	↑	X						
6/18/20/03	NA	LDW-RM18-W-WF-Comp2	1	↓	X						
6/24/03	NA	LDW-RM18-W-WF-Comp3	1	↓	X						
6/24/03	NA	LDW-LW-H-SL-Comp1	1	tissue		X					Archive

14  
15  
16  
17  
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Total Number of Containers: \_\_\_\_\_ Purchase Order / Statement of Work # \_\_\_\_\_

1) Released by: <u>Joanna Floner</u> Print name: <u>J. Floner</u> Signature: <u>[Signature]</u> Company: <u>Windward</u> Date/Time: <u>6/27/03 1705</u>	1) Rec'd by: <u>[Signature]</u> Company: <u>ARI</u> Date/Time: <u>6/27/03 1705</u>	2) Released by: <u>ERIC BRANSON</u> Print name: <u>Eric Branson</u> Signature: <u>[Signature]</u> Company: <u>ARI</u> Date/Time: <u>9/24/03-1435</u>	1) Rec'd by: _____ Company: _____ Date/Time: _____
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To be completed by Laboratory upon sample receipt:

Date of Receipt	Laboratory W/O
Condition upon Receipt	Time of Receipt
Comply Requirements	Received

112307475  
1308

**CHAIN-OF-CUSTODY/TEST REQUEST FORM**

Project/Client Name: POS/LDWG  
 Windward Project No: 03-08-00-16  
 Contact Name: Joanna Florer  
 Sampled By: JMP

Ship to: ART  
 Attn: Sue Dunn, hood Shipping Date: \_\_\_\_\_  
 Shipping address: hand delivered Airbill Number: \_\_\_\_\_

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)]
					Monomnize	Archive					
6/19/03	1000	LDW-RM18-H-WF-Comp2	1	tissue	X						
6/20/03	1030	LDW-RM18-H-WF-Comp3	1	↑	X						Nonmonnize for archive like previous samples
6/18/03	1130	LDW-RM18-W-WF-Comp1	1		X						
6/18-20/03	NA	LDW-RM18-W-WF-Comp2	1		X						
6/24-25/03	NA	LDW-RM18-W-WF-Comp3	1	↓	X						
6/24/03	NA	LDW-LW-H-SC-Comp1	1	tissue		X					Archive
Total Number of Containers				Purchase Order / Statement of Work #							

1) Released by: Joanna Florer  
 Print name: J. Florer  
 Signature: [Signature]  
 Company: Windward  
 Date/Time: 6/27/03 1705

1) Rec'd by: [Signature]  
 Company: ART  
 Date/Time: 6/27/03 1705

2) Released by: [Signature]  
 Print name: Eric Branson  
 Signature: [Signature]  
 Company: ART  
 Date/Time: 9/24/03-1435

1) Rec'd by: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Date/Time: \_\_\_\_\_

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To be completed by Laboratory upon sample receipt:

Date of receipt:	Laboratory W.O. #:
Condition upon receipt:	Time of receipt: <u>9/24/03 1435</u>
Cooler temperature:	Received by: <u>[Signature]</u>



