## **PCB Sample Chain of Custody Form**

Project Name:
Project Number:
Location:

Client: Sampler's Name: Sampling Date:

## Sample Information

Sample ID	Sample Location	Sample Matrix	Sample Type	Container Type	Preservative	Analysis Requested	 Relinquished By (Name/Signature)	Date/Time	Received By (Name/Signature)	Date/Tim

## Comments / Special Instructions

Final Receipt at Laboratory

Received By (Name/Signature): Date/Time: Condition of Samples: