

Lakeland Laboratories, LLC

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Work Order # _____

Chain of Custody Record

Company:		Project Name:						Page 1 of 1										
Address:		Project #:						DEP Form #: 62-770.900(2)										
Phone: _____ Fax: _____		Project Manager:						Form Title: Chain of Custody Record										
		Project Location:						Effective Date: September 23, 1997										
		P. O. #:						FDEP Facility No.:										
Sampled by [Print Name(s)] / Affiliation						Preservatives (see codes)				Project Name:								
						--												
Sampler(s) Signature(s)						Analyses Requested				REQUESTED DUE DATE								
										/ /								
Item No.	Field ID No.	Sampled		Grab or Composite	Matrix (see codes)	Number of Containers	LL-Sulfur*										Remarks	Lab. No.
		Date	Time	Grab	O-Drywall		X										*Elemental sulfur by HPLC.	
Shipment Method										<= Total Number of Containers								
Out: / /	Via:	Item No.	Relinquished by / Affiliation				Date	Time	Accepted by / Affiliation			Date	Time					
Returned: / /	Via:																	
Additional Comments:																		
		Cooler No.(s) / Temperature(s) (° C)						Sampling Kit No.			Equipment ID No.							
		° C																
MATRIX CODES: A = Air GW = Groundwater SE = Sediment SO = Soil SW = Surface Water W = Water (Blanks) O = Other (specify)																		
PRESERVATIVE CODES: H = Hydrochloric acid + ice I = Ice only N = Nitric acid + ice S = Sulfuric acid + ice O = Other (specify)																		