# Chain of Custody / Analysis Request

**Report to:** John C. Meyer  
**Address:** 30485 SW Boones Ferry Rd STE 102  
**City:** Wilsonville  
**Attn:**  
**Phone:**  
**Email:**  
**Project:** School End  

**Bill to:**  
**Address:**  
**City:**  
**Attn:** P.O. #:  
**Phone:**  
**Email:**  
**Card#:**  

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**Check Regulatory Act:**  
- Safe Drinking Water Act  
- Clean Water Act  
- RCRA / CERCLA  
- Other

**Turn Around Time Required**  
- Standard  
- Half-time (50% surcharge)  
- Quickest (100% surcharge) Phone Call Req.  
- Emergency (Phone Call Req.)

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**Analyses Requested**

<table>
<thead>
<tr>
<th>Field ID</th>
<th>Location</th>
<th>Grab/Comp.</th>
<th>Sample Matrix</th>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 43990101-007OS</td>
<td>OUTSIDE SPIGOT - back</td>
<td>DW</td>
<td>8/5/21 12pm</td>
<td><strong>LEAD</strong></td>
<td>1</td>
</tr>
</tbody>
</table>

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**Are there known hazardous or dangerous wastes in these samples? YES / NO**  
If YES, indicate type on reverse of this form; samples may be returned to you.

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**Sample Receipt Request (Must include Email)**

**Sampled by:** John Meyer  
**Phone:** 541-990-1356  
**FAX:**  
**Email:** jmeyer@oregoncharter.org

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**Received by:**  
**Date:** 8/16/21 8:45  
**Custody seals intact**

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**Relinquished by**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/16/21</td>
<td>2:15</td>
</tr>
</tbody>
</table>

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**Sample temp 21°C satisfactory**

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**Samples received intact**

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**Chain of custody & labels agree**

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FORM: CECRev 2-7-21