



# Chain of Custody Form

**\*For Environmental Samples**

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## COMPANY INFORMATION

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext. #: \_\_\_\_\_  Bill to Credit Card on File  
 Email for results: \_\_\_\_\_

## SAMPLE INFORMATION

Project Name: \_\_\_\_\_ Date specimen(s) collected: \_\_\_/\_\_\_/\_\_\_  
 Address where sample collected: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Specimens collected by (print name): \_\_\_\_\_ Signature: \_\_\_\_\_  
 Specimens released by (print name): \_\_\_\_\_ Signature: \_\_\_\_\_  
 Date released: \_\_\_/\_\_\_/\_\_\_ Via (courier): \_\_\_\_\_ Tracking #: \_\_\_\_\_

Test Selection:						Sample #:	Sample Description (please print clearly):	RTL # (Lab Use Only)
EMMA (D8700)	Quad Myco. (D8400)	Tricho. Only (D8503)	Afla. Only (D8502)	Ochra. Only (D8501)	Glio. Only (D8510)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	

**UP TO THREE SAMPLES MAY BE COMBINED AND RUN AS A COMPOSITE. FOR THIS SERVICE, LIST THE SAMPLE NUMBERS TO BE COMBINED ON ONE LINE**

For Lab Use Only:  
 Specimens received by (print name): \_\_\_\_\_ Signature: \_\_\_\_\_  
 Date received \_\_\_/\_\_\_/\_\_\_ Via (courier): \_\_\_\_\_ Tracking #: \_\_\_\_\_ Payment: CC / Check / MO / Company CC / None  
 Notes \_\_\_\_\_