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 www.meritlabs.com

C.O.C. PAGE # _____ OF _____

REPORT TO

INVOICE TO

CONTACT NAME _____
 COMPANY _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____
 PHONE NO. _____ FAX NO. _____ P.O. NO. _____
 E-MAIL ADDRESS _____ QUOTE NO. _____

CONTACT NAME _____ SAME
 COMPANY _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____
 PHONE NO. _____ FAX NO. _____ P.O. NO. _____

PROJECT NO./NAME _____ SAMPLER(S) - PLEASE PRINT/SIGN NAME _____
 TURNAROUND TIME REQUIRED 24 HR 48 HR 72 HR STANDARD OTHER
 DELIVERABLES REQUIRED STANDARD LEVEL II LEVEL III OTHER

MATRIX CODE: GW=GROUNDWATER SL=SLUDGE WW=WASTEWATER O=OIL S=SOIL A=AIR L=LIQUID W=WASTE SD=SOLID M=MISC

ANALYSIS (ATTACH LIST IF MORE SPACE REQUIRED)

MERIT LAB NO.	YEAR		SAMPLE TAG IDENTIFICATION-DESCRIPTION	MATRIX	# OF BOTTLES	# Containers & Preservatives								SPECIAL INSTRUCTIONS/NOTES
	DATE	TIME				NONE	HCL	HNO ₃	H ₂ SO ₄	NaOH	MeOH	OTHER		

RELINQUISHED BY: SIGNATURE/ORGANIZATION _____ DATE _____ TIME _____
 RECEIVED BY: SIGNATURE/ORGANIZATION _____ DATE _____ TIME _____
 RELINQUISHED BY: SIGNATURE/ORGANIZATION _____ DATE _____ TIME _____
 RECEIVED BY: SIGNATURE/ORGANIZATION _____ DATE _____ TIME _____

RELINQUISHED BY: SIGNATURE/ORGANIZATION _____ DATE _____ TIME _____
 RECEIVED BY: SIGNATURE/ORGANIZATION _____ DATE _____ TIME _____
 SEAL NO. _____ SEAL INTACT YES NO INITIALS _____
 SEAL NO. _____ SEAL INTACT YES NO INITIALS _____
 NOTES: TEMP. ON ARRIVAL _____

PLEASE NOTE: SIGNING ACKNOWLEDGES ACCEPTANCE OF TERMS & CONDITIONS ON REVERSE SIDE