



# Mold Chain of Custody

**Turnaround:**   ♦  Immediate = see note\*   ♦  1 day   ♦  2 day   ♦  Cultures = 7-14 days

\* Please make an appointment for after-hour, weekend & immediate samples.

<i>Lab Job#</i>	_____
<i>Lab Job#</i>	_____
<i>Lab Job#</i>	_____

**Company Name and City:** \_\_\_\_\_ No. of Samples: \_\_\_\_\_

Submitter's Name: \_\_\_\_\_ Sample date: \_\_\_\_\_ P.O. No: \_\_\_\_\_

Project: \_\_\_\_\_ Project No: \_\_\_\_\_

**Contact Information:** Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Invoice Address: \_\_\_\_\_ Fax #: \_\_\_\_\_

*\*Please review paperwork and samples before submitting to lab. Uncontained / improperly packaged samples or excessive administrative requests may incur additional fees.\**

Notes: \_\_\_\_\_

Spore Trap Standard	Spore Trap Expanded	Direct Exam Tape / Bulk / Swab	Culture	Sample No.	Sample Description	Volume or Area	Field Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
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♦ Spore Trap (Air-O-Cell, Allergenco D, Digital DIS, Micro 5, etc.) Standard – count and genus ID ♦ Expanded – count, genus ID, insect parts, pollen, fibers, and skin ♦ Direct Exam – genus ID, relative presence.

Released by:	Date/Time:	Received By:	Date/Time:
Released by:	Date/Time:	Received By:	Date/Time: