



# GLP CHAIN OF CUSTODY RECORD

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P.O. Number:		Total No. of Samples:		Analyses Requested								Return Sample to Study Sponsor for Archiving (Y / N)	AquaTox Sample No.	Date Sample Archived or Returned to Study Sponsor				
Custody Relinquished by:																		
Printed Name:						Affiliation:												
Signature:						Date/Time:												
Sample Storage Requirements:																		
Comments:																		
<b>Sample Identification</b>																		
Sample Size (e.g. 1L, 500 g)	# of Containers	Sample Name and Description				Lot # / Batch #												
<b>Laboratory Use Only</b>								Study Sponsor's Name:										
Received By:				Date / Time:				Address:										
Affiliation:				MSDS / Sample Label Enclosed:														
Sample Container Condition upon Arrival:								Phone: <span style="float: right;">Fax:</span>										
Sample Storage Conditions:				Sample Volume:														
Sample Storage Location:								Contact:										
AquaTox Work Order No:				AquaTox Project No:														