

Client Contact		Project Manager:			Site Contact:			Date:			COC No:	
Your Company Name:		Tel:			Lab Contact:			Carrier:			____ of ____ COCs	
Address:		<b>Analysis Turnaround Time</b> <small>Rush Charges Apply for less than 7 Business Days</small> <input type="checkbox"/> 7 Business Days <input type="checkbox"/> 3 Business Days <input type="checkbox"/> 2 Business Days <input type="checkbox"/> 1 Business Day <small>* No Guarantee we can perform rush analysis - call!</small>			<small>7 Anions</small> <small>4 Basic Anions</small> <small>7 Cations</small> <small>4 Basic Cations</small> <small>6 Cations</small> <small>Weak Organic Acid - Single Analyte</small> <small>Formic &amp; Acetic Only</small> <small>4 Basic Weak Organic Acids</small> <small>6 Weak Organic Acids</small>			<small>Filtered Sample</small> <small>Anion - Single Analyte</small> <small>Chloride &amp; Sulfate Only</small> <small>4 Basic Anions</small> <small>Cation - Single Analyte</small> <small>Sodium &amp; Ammonium Only</small>			<small>Job No.</small>	
City/State/Zip:												
Phone:												
Email:												
Project Name:												
Site:		<b>Sample Identification</b>			<b>Sample Specific Notes:</b>			<small>Sample Specific Notes:</small>				
PO#: (Net 30 Maximum - Provide Copy of PO with Order - Address PO to Advanced Separations Ltd)												
<b>Preservation Used:</b> 1= Ice, 2= HCl; 3= H <sub>2</sub> SO <sub>4</sub> ; 4=HNO <sub>3</sub> ; 5=NaOH; 6= Other												
<b>Possible Hazard Identification</b>												
Non-Hazard	Flammable	Skin Irritant	Poison B	Unknown	<input type="checkbox"/> Return To Client <input type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Days							
<b>Special Instructions/QC Requirements &amp; Comments:</b>												
Relinquished by:		Company:		Date/Time:		Received by:		Company:		Date/Time:		
Relinquished by:		Company:		Date/Time:		Received by:		Company:		Date/Time:		
Relinquished by:		Company:		Date/Time:		Received by:		Company:		Date/Time:		