

# SUMMIT LABORATORY

900 Godfrey Ave SW, Grand Rapids, MI 49503

phone: 616-245-3818 email: mail@summitlaboratory.com

# Chain of Custody

1535 Industrial Park Drive, Hart, MI 49420

phone: 231-873-1432 ext. 227

Version 11.0, Effective: 1-2024

<b>Project #:</b>
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Customer:	Job Description: <b>Pharmaceutical Samples</b>	Email:
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Address:	Job Name:	<b>Analytical Parameters (Tests Requested)</b>
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City, Zip:	Contact Person:
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Phone:
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Item	Product Number	Date	Time	Sample Description / Lot	No. of	Analytical Parameters (Tests Requested)						Notes:	
No.	Sample Number	Taken	Taken	(sample type: pharmaceutical samples)	containers								
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

Released by:	Received by:	Date:	Time:	Lab Notes:
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Released by:	Received by:	Date:	Time:
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