

Description

1. **Client Job No:** (Optional) The number that you have given to this job. Usually a unique number.
2. **Company or Client Name:** (Required) This is your name or your business' name. It will be printed on the final report as the company involved.
3. **Address:** (Required) Your company's address or your home address.
4. **Contact Information:** (Required) We will also require this information,
5. **E-mail:** if you would like us to contact you by email
6. **Phone :** Put your company phone number
7. **Contact Name and Invoice to:** (Required) Contact name is your name or the name of the person that you want on the report. Invoice contact is the name that will go on the invoice, if different from the regular contact.
8. **Sample ID:** (Required) This is the number or identification you give to a sample. (i.e. meat, cheese,).
9. **Date Collected:** (Required) The date that you collected the samples on.
10. **Sample Location/Description:** A description of the location where the sample come from (ie., plan1, section 4, ...)
11. **LOT:** (Required) The lot identification number **11 A** You need to write the quantity send
12. **Pathogens ID:** (Required) This place is reserved for type of tests required
13. **Sample details:** (Required) Please check analysis requested
14. **Turnaround Time Required:** (Required) "S" is standard turnaround "R" is rush turnaround, and "H" is holiday service, which includes both holidays and long weekends.
15. **Testing Authorized by:** (Required) An authorizing signature *must* be on the form for the samples to be analyzed. Please print your name, **sign and date the form.**
16. **Reserved for Reception.**

