

Customer Project ID:										~Lab Use Only~		Received by:		Date:		LS SRN:																			
Primary POC:						Email:						Tel:																							
Alternate POC:						Email:						Tel:																							
Alternate POC:						Email:						Tel:																							
Address:						Collection Site or Facility:																													
Fund Source:						MIPR No.:				Project Class:																									
LS Sampling Kit: Yes No Date Required:						LS Sampling Kit Needed:				Pick Up		Mail		WBS #:																					
Date RLS Submitted:						Planned Collection Date:				Planned Delivery Date:																									
In-House Anaysis Priority Requested: Routine (30 days) Immediate (14 days) Emergent (7 days) Justification for elevated priority:																																			
~Lab Use Only~ LS Folder:																		Contract Lab Folder:																	
Sample Information						Analyses Requested																													
						Organic Division				Inorganic Division				Contract Laboratories				Additional Testing				Additional Testing													
Customer Sample Number																																			
DOEHRS ID (EHS Only)																																			
Sample Date			Sample Time																																
pH		Temp °C		* Matrix																															
Customer Sample Number																																			
DOEHRS ID (EHS Only)																																			
Sample Date			Sample Time																																
pH		Temp °C		* Matrix																															
Customer Sample Number																																			
DOEHRS ID (EHS Only)																																			
Sample Date			Sample Time																																
pH		Temp °C		* Matrix																															
Customer Sample Number																																			
DOEHRS ID (EHS Only)																																			
Sample Date			Sample Time																																
pH		Temp °C		* Matrix																															
Customer Sample Number																																			
DOEHRS ID (EHS Only)																																			
Sample Date			Sample Time																																
pH		Temp °C		* Matrix																															
Proceed with analysis if samples arrive outside of recommended hold time/tolerance? Yes No								Does analyses require FGS compliance? Yes No								Are changes to the decision rule required? Yes No																			
*Matrix Options: Potable Water (PW)																		Non-Potable Water (NPW)				Dental Water (DW)				Soil (SL)									
Please access the PHCE LS website at https://mrc-europe.army.mil/Public-Health-Command-Europe/-Programs-Services/-Laboratory-Sciences/																																			
If you require more space, please use the supplemental sample sheet(s) available at the website above and attach to the packet.																																			

Customer Remarks/Special Instructions		
		Lab Use Only: Organic Chemistry Division
		Accept Reject
Lab Use Only: Inorganic Chemistry Division	Lab Use Only: Biological Analysis Division	Lab Use Only: Laboratory Operations Division
Accept Reject	Accept Reject	Accept Reject
Lab Use Only: Eurofins Tests	Lab Use Only: DCPH Tests	Lab Use Only: Remarks
Modifications to RLS have occurred: Yes No		
QC check of RLS complete: Yes No		
<div>Telephone DSN: 314-590-9710 Comm: +49 (06371) 9464-9710 Email usarmy.landstuhl.phc-europe.mbx.ls-hotline@health.mil Website https://mrc-europe.army.mil/Public-Health-Command-Europe/-Programs-Services/-Laboratory-Sciences/</div>	<div>German Shipping Address U.S. Army Public Health Command Europe ATTN: Laboratory Operations Division Gebaeude 3809, Raum N202 Kirchberg Kaserne, D-66849 Landstuhl, Germany</div>	<div>Military Mailing Address Public Health Command Europe Laboratory Sciences Laboratory Operations Division CMR 402 Unit 33105 APO, AE 09180</div>