LOD Form 1 Supplement
Version 1.1
10 May 2019

USA Public Health Command Europe
Laboratory Sciences (LS)
Request for Laboratory Services (RLS)

Additional Samples

Project No.: | ***~Lab Use Only~ Received By:*** | ***Date:*** | ***LS SRN:***

~Lab Use Only~ LS Folder: | ***Contract Lab Folder:***

Matrix	Customer Sample No.	Sample Date	Sample Time	Field Data		Analyses Requested																						
				pH	Temp																							

Proceed with analyses if samples arrive outside of recommended hold time/tolerance: ☑ Yes ☐ No

If a specific method is required, please specify in the remarks section.

Remarks: