

LOGIN REPORT/SAMPLE TRANSFER

Order ID : Client Name : Client Contact : Invoice Name :		Kleinfelder Mark Warchol	POWE02	Project Name :			4/25/2025 11:06:00 AM Mitchell School Lincoln High School 4/25/2025 10:45:00 AM		Project Mgr : Report Type :	Results+QC		
								EDD Type		EXCEL NOCLEANUP		
					Purch	ase Order :		Hard Copy I				
Invoice	Contact :	Mark Warchol							Date Signoff :			
LAB ID	CLIEN	T ID		MATRIX	SAMPLE DATE	SAMPLE TIME	TEST	TEST GROUP	METHOD		FAX DATE	DUE DATES
Q1889-01		COMP-1		Solid	04/24/2025	10:15						
							VOCMS Group1		8260D	5 Bus. Days		
Q1889-02		COMP-2		Solid	04/24/2025	10:45						
							VOCMS Group1		8260D	5 Bus. Days		
Q1889-03		COMP-3		Solid	04/24/2025	11:25						
							VOCMS Group1		8260D	5 Bus. Days		

Relinguished By : Date / Time : 4125125 1130

Received By: Sam 11:34 Ng+ 6 Date / Time: 04/25/25

Storage Area : VOA Refridgerator Room