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ALLIANCE PROJEC	OT NO.
QUOTE NO.	()2680
COC Number	15010

TEOR	CLIENT INFORMATION	CLIENT PROJECT INFORMATION											_						
		_		1		100		TION	# 44					CLIENT BILLING INFORMATION					
COMPANY:	Av aunzak Uniforms 240 Fralinghuysen AUE Davk STATE: N.J. ZIP: 07/14	PROJE	PROJECT NAME: Monthly								BILL	го:			PO#:				
ADDRESS:	240 Frelinghuysen AUE	PROJE	PROJECT NO.: LOCATION								ADDF	RESS:							
CITY NEW	Jakk STATE:N.1. ZIP: 07/14	PROJEC	CT M	ANAC	GER:	₹:					CITY LA UNI				STATE: ZIP:			ZIP:	
ATTENTION:		e-mail:									ATTENTION:				PHONE:				
PHONE:	FAX:	PHONE	PHONE: FAX:												AN/	ALYSIS			
	DATA TURNAROUND INFORMATION		DATA DELIVERABLE INFORMATION								7.14		Į.					البركب	
FAX (RUSH) HARDCOPY (D EDD: *TO BE APPRO STANDARD HA	Leve	Level 1 (Results Only) Level 4 (QC + Full Raw Data) Level 2 (Results + QC) NJ Reduced US EPA CLP Level 3 (Results + QC NYS ASP B NYS ASP																	
			SAN	IPLE	SAI	MPLE	S		3114		PRESERVATIVES						COMMENTS		
ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX		GRAB 34)		TIME	# OF BOTTLES							-	-		A-HCI B-HN03	D-NaOH E-ICE	
1.	Comp	10	λ	4	22201	12:42	_	X	2 X	3	4	5	6	7 -	8	9	C-H2SO4	F-OTHER	
2.	CRAB	AQ		V		12:28		<u> ^</u>		X					-		-		
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4.										1									
5.										1									
6.																			
7.																			
8.																			
9.																			
10.																			
2 (SAMPLE CUSTODY MUST BE DOC	UMENTE) BEI	Lρw	EACH TI	ME SAMP	LES CI	HANGE	POSS	SESSIO	N INCL	UDING	COUR	IER DE	LIVER	Υ			
RELINQUISHED BY SAMPLER: DATE/TIME: DATE/TIME: RECEIVED BY: Conditions of bottles or coolers at receipt: Compliant Compliant Comments: Commen								°C											
2.	2.	A																	
RELINQUISHED B	Y SAMPLER: DATE/TIME: [73 RECEIVED 19]: 7.73.2075 3.	()-	-		Page	of		CLIENT	F: 🗆	Hand D	elivered	Q 0)ther					nt Complete	