



IAS Laboratories

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Chain of Custody

(Print and send in with Samples)

Date _____
Time _____

Name _____
Address _____

Email: _____
Phone _____

Sample ID	Sample Description (What are your concerns)	Lab No	Test Required

Method of Shipment _____

Relinquished by: _____

Payment _____
Paypal, CC#, Check #

Print Name: _____