

TRSA Chain of Custody Form

EMSL Order Number / Lab Use Only

EMSL Analytical, Inc. 5950 Fairbanks North Houston Rd Houston, TX 77040

PHONE: (713) 686-3635

EMAIL: houstonlab@emsl.com

If Bill-To is the same as Report-To leave this section blank. Third-party billing requires written								vritten authorization.	
	Customer ID:				Billing ID:				
Customer Information	Company Name:				Company Name:				
	Contact Name:			nation	Billing Contact:				
	Street Address:			Information	Street Address:				
	City, State/Province , Zip/Postal Code:			Billing	City, State/Province , Z	Country:			
Š	Phone:			8	Phone:	ne:			
	Email(s) for Report: *See note				Email(s) for Invoice:				
	in project Info Project Information								
	ject ID:				State where	Alas Email Band	ort To:		
					Also Email Report To: Certification@trsa.org				
Sar	mpled By Name:		Sampled By Signature:				No. of Sampl Shipm	es in	
	Sales Representative: Natalie Murphy 856-303-3430 nmurphy@emsl.com								
Attention: Terri Lawrence, Microbiology Lab Manager									
M580 - <u>USP<62></u> : Microbiological Examination of Non-Sterile Products Tests for Specified Microorganisms Price: \$313.00 Per Sample C. difficile Screen Fee: \$22.00 (Lab will call first)									
M5	M581 - <u>RODAC</u> : Bacterial and Fungal Counts by Contact (RODAC) Plate Price: \$33.00 Per Test Each, Bacteria and Fungi (\$66.00 Per Sample Total)								
Hygienically Clean Program: Check the appopriate box below:									
Health Care: <20 CFU/dm ²					Food Safety/Service: <50 CFU/dm ²				
Hospitality: <50 CFU/dm ² Generic: <50 CFU/dm ²									
	Sample ID:					Tests Requested:			
						Rodac		JSP <62>	
						Rodac		JSP <62>	
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						Rodac		JSP <62>	
	Wethod of Shipment:				Sample Condition Upon Receipt:				
Relinquished by: Date/Time			Date/Time		Received by:	Date/Time			
Rel	inquished by:		Date/Time		Received by:	Date/Time			