Chain of Custody – FOOD

ALS Laboratory Group

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DO NOT FILL DO NOT FILL DO NOT FILL DO NOT FILL

CODE OR NAME OF ANALYSIS (see inst. 7)

Analysis 1	Analysis 2	Analysis 3	Analysis 4	Analysis 5	Analysis 6	Analysis 7	Analysis 8	Analysis 9	Analysis 10	Analysis 11	Analysis 12

CONTACT PERSON AND ADDRESS (correspondence) (1)

Client	
Address	
Contact person	
Phone Nr.	
E-mail	

SAMPLE INFORMATION (see inst. 5)

Sampling date:	
Delivery date*	
Express:	Yes ☐ No ☐

*TAT is 7-10 days. In case you need delivery time <7 days, please, write the date to "Express" and sign "Yes". Express taxes:

≤ 3 days 100%	4 days 50%	5 days 30%

ADDRESS (invoice) (2)

Address	
Contact person	

PROJECT INFORMATION (see inst. 3,4)

Project name	
Offer Nr.	
Order Nr.	

Sample Nr.	SAMPLE NAME (see inst. 6)	MARK REQUIRED ANALYSIS (see inst. 8)	MATRIX a/ choose note under	REMARK (see inst. 10)

SIGNATURE (11)

Client´s signature	
Date	

DON´T FULFILL!!!

Accepted by lab	Date and time	Assigned by	Approved by Date
Delivery conditions		Temperature of delivery	

Please, fill in the form readable.

1 - milk and dairy products
2 - delikatessen
3 - meals
4 - meat and meat products
5 - mill products
6 - pastry and cereals
7 - confectionery
8 - food supplements
9 - beverages,
10 - eggs products
11 - fats and oils
12 - spice
13 - dried herbs,
14 - additives and flavours,
15 - fruit and vegetablesw
16 - swab
17 - baby food
18 - feed
19 - others