CDC

DENELE ANALYTICAL
1232 SOUTH AVE.
TURLOCK, CA 95380
PH# 209-634-9055 FAX# 209-634-9057

DATE: _____

DAIRY# _____
(INTERNAL USE ONLY)

REPORT & BILL TO		COPY TO	
CLIENT:			Full Service
ADDRESS:			
CITY, STATE:	ZIP:		Record
PHONE:	FAX:		Keeping
		ADDRESS:	
PROJECT ID:		CITY/STATE: ZIP:	Information
SAMPLED BY:	(PRINT)	PH#	to Dairy
	(SIGN)	FAX#	OFFICE USE ONLY

DATE COLLECTED	TIME COLLECTED	TEST CODE	TEMP °C	EC	SAMPLE ID	WELL PURGE TIME	DESCRIPTION	LAB #

REMARKS:

RELINQUISHED BY (SIGNATURE)	DATE	TIME	RECEIVED BY (SIGNATURE)	DATE	TIME
RELINQUISHED BY (SIGNATURE)	DATE	TIME	RECEIVED BY (SIGNATURE)	DATE	TIME
RELINQUISHED BY (SIGNATURE)	DATE	TIME	RECEIVED BY (SIGNATURE)	DATE	TIME