



Keystone Labs Inc.
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SAMPLE SUBMISSION / CHAIN OF CUSTODY FORM HAND SANITIZER

Contact and Client Tracking Information

Name:	Company:	Email:	Tel.:
Invoice address:			Client PO#:
Keystone Labs Job #:	Sampling Handling Assay:	Invoice #:	Quote #:

Sample and Data Handling	Priority:	<input type="checkbox"/> Standard	<input type="checkbox"/> Rush
	Raw Data required:	<input type="checkbox"/> Yes (25% surcharge will be applied)	

Sample Name, Lot # and Specification	Quantity (g/mL)	Microbiology Methods							Other Methods				K/S	
		USP or EP Method	Total Aerobic Count	Total Yeast and Mold	Presence/Absence (S.aureus)	Presence/Absence (P.aeruginosa)				Ethanol/ Isopropanol	Heavy Metals	Hydrogen Peroxide		Appearance

Additional Information:

Analysis requested by: _____ Date: _____

Samples received by: _____ Date: _____

Job closed by: _____ Date: _____

Contact and Client Tracking Information

The contact information given should be for the person to whom the results will be given and who may be contacted if clarity is required. The Keystone Labs job # is assigned by Keystone Labs when the sample is received. It will be the number used to track the progress of the order. Indicate the PO number and the invoice address.

Raw Data

Keystone Labs Inc. can provide client copies of raw data. A surcharge of 25% will be applied for raw data.

Priority

Keystone Labs Inc. will process all samples on a first come first serve basis. Standard samples are set-up for testing within five business days of receipt and rush samples are set-up within two days of receipt at a 100% surcharge. Please consult your client manager before requesting rush samples. Advance notice will also expedite the receiving process.

Disposal

Upon completion of testing, any remaining sample will be destroyed.

Sample Name and Specification

Please indicate the name of the sample as it should appear on the Testing Summary as well as the sample specification. If more room is required, record in the additional information section. An MSDS must accompany all hazardous samples submitted to Keystone Labs.

Sample Storage

Please indicate the sample storage conditions. If no storage requirement is indicated, samples will be stored at room temperature.

Test Required

Please indicate which test(s) are required for each sample. If a replicate testing is required, please record the appropriate number in the test space instead of marking with a check or an X.

Keystone Use Only

This information is recorded by Keystone Labs and will be used to trace your samples and the raw data relating to them.

Additional Information

Any other pertinent information regarding the sample should be included here. Examples are information regarding sample hazards, special handling requirements, sample size, sample composition, number of containers of the sample etc. Any additional information such as sample specification, special testing or handling instructions can be recorded in this space. If additional space is required, a separate page may be attached. Please indicate on the sample submission form if additional pages are attached.

Signature

The analysis requested by signature indicates you have supplied all information that Keystone Labs may require to process the sample(s) submitted and that you understand and agree to the additional costs as applicable for the requested tests, priority, QA level and disposal.