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GUADALUPE-BLANCO RIVER AUTHORITY LABORATORY CHAIN OF CUSTODY



Customer Information

Customer Acct.#:					RUSH Analysis : _____ by EOB (Additional Fees Apply)							
Name:					Billing Address:							
Address:					Fax #:							
Phone #:					Email 1:				Email 2:			
Thermometer #:					Chlorine Strip GBRA Reagent #				Chlorine : Absent/ Present			
Receipt Temp (°C) Observed / Corrected: /					pH Paper GBRA Reagent #:							
Ice: Yes / No (Circle One)					Residual Chlorine (Total/Free) Results:							
# of Containers:			Condition of Containers (Intact): Yes / No (Circle One)									
Date Collected	Time Collected	Matrix WW=Wastewater DW=Drinking Water SW=Surface Water S=Soil/Sludge	Sx Vol. P=Plastic G=Glass	Sample Name/Description	TCEQ ID Number	Grab / Comp.	Analysis Requested	GBRA Sample ID	Bottle I.D.#	pH	Type of Preservation	Rush sample (2x, 3x, 4x)
Collected By:					Date/Time:		Transferred To:			Date/Time:		
Released From:					Date/Time:		Received By:			Date/Time:		
Released From:					Date/Time:		Received By:			Date/Time:		
Released From:					Date/Time:		Received By:			Date/Time:		
Released From:					Date/Time:		Received By:			Date/Time:		
NOTES / COMMENTS / SHIP TO:												