GatewayAnalytical®

Request for Analysis/Chain of Custody

SUBMIT SAMPLES TO: Gateway Analytical, LLC 2009 Kramer Road Gibsonia, PA 15044 Phone: (724) 443-1900 Fax: (866) 658-1445	**PO/Payment Method (REQUIRED):** **Gateway Analytical Use Only:** **Customer Code:** **Project Number:**	**Sample Submission Instructions:** • Please fill out ALL required fields • Please provide one (1) form per project/report. List each individual sample separately, in the sample information section. • ALL expedited TAT require prior approval; Contact your Account Manager or Lab Manager

Report To (REQUIRED):

Company: Contact Name:

Address: Phone:

City, State, Zip: Email:

                                                        Quotation number:

Invoice To (REQUIRED):   SAME AS ABOVE

Contact Name:

Phone:

Email:

Additional Information:

Is this for Release Testing or an FDA submission?   Yes   No   N/A

Is this material cytotoxic?   Yes   No   N/A

Case number (criminal cases): _____   N/A

Controlled Substance: ☐ **No**   ☐II   ☐III   ☐IV   ☐ V   **DEA Registration # _____**

(REQUIRED) Note: Gateway will only accept Schedule II and above controlled substances

Requested TAT: **(REQUIRED)**	☐ STANDARD ☐ Expedited ☐ 24 Hour RUSH	**Sample Handling:** ☐ Non-hazardous ☐ Hazardous ☐ MSDS Included	**Store At:** ☐ Ambient ☐ Refrigerate ☐ Freeze	**Sample Disposition: (REQUIRED)** Discard Return Discard after 30 days Shipping Account Information (for Returns): _____

Sample Information (Use additional page if more space needed):

Item	Sample ID	Sample Description	Requested Analysis	GA Sample ID
1				
2				
3				
4				
5				

Comments/Special instructions:

Chain of Custody (Record of sample exchange):

Originated by (print): **Originated by (sign):** **Date/Time**	**Received by (print):** **Received by (sign):** **Date/Time**	**Relinquished by (print):** **Relinquished by (sign):** **Date/Time**
Relinquished to (print): **Relinquished to (sign):** **Date/Time**	**Relinquished by (print):** **Relinquished by (sign):** **Date/Time**	**Relinquished to (print):** **Relinquished to (sign):** **Date/Time**

Delivered by: _____   Packaging: _____

Custody Seals Intact?   Yes / No / Not Present

Sample Condition upon Receipt: As Expected / Not As Expected

Login By Initials/Date:

Comments:

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Sample Information (continued, if needed):

Item	Sample ID	Sample Description	Requested Analysis	GA Sample ID
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