

# ALS Laboratory Group -- FC

## Sample Number(s) Cross-Reference Table

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**Paragon OrderNum:** 0912168

**Client Name:** Cabrera Services Inc.

**Client Project Name:** Forest Glen Rad Scoping Survey

**Client Project Number:** 08-3800.04

**Client PO Number:** 10-30322

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Client Sample Number	Lab Sample Number	COC Number	Matrix	Date Collected	Time Collected
SU-ALL-COMP	0912168-1	SU01-COMP	WIPE	18-Dec-09	12:00
SU-ALL-COMP a	0912168-2	SU02-TOP-CO	WIPE	18-Dec-09	
SU-ALL-COMP b	0912168-3	SU02-BOTTO	WIPE	18-Dec-09	
SU-ALL-COMP c	0912168-4	SU03-COMP	WIPE	18-Dec-09	
SU-ALL-COMP d	0912168-5	REF-COMP	WIPE	18-Dec-09	





CONDITION OF SAMPLE UPON RECEIPT FORM

Client: Cabrera

Workorder No: 0912168

Project Manager: LS

Initials: CDT Date: 12-19-09

1. Does this project require any special handling in addition to standard Paragon procedures?		YES	<input checked="" type="radio"/> NO
2. Are custody seals on shipping containers intact?	NONE	<input checked="" type="radio"/> YES	NO
3. Are Custody seals on sample containers intact?	<input checked="" type="radio"/> NONE	YES	NO
4. Is there a COC (Chain-of-Custody) present or other representative documents?		<input checked="" type="radio"/> YES	NO
5. Are the COC and bottle labels complete and legible?		<input checked="" type="radio"/> YES	NO
6. Is the COC in agreement with samples received? (IDs, dates, times, no. of samples, no. of containers, matrix, requested analyses, etc.)		<input checked="" type="radio"/> YES	NO
7. Were airbills / shipping documents present and/or removable?	DROP OFF	<input checked="" type="radio"/> YES	NO
8. Are all aqueous samples requiring preservation preserved correctly? (excluding volatiles)	<input checked="" type="radio"/> N/A	YES	NO
9. Are all aqueous non-preserved samples pH 4-9?	<input checked="" type="radio"/> N/A	YES	NO
10. Is there sufficient sample for the requested analyses?		<input checked="" type="radio"/> YES	NO
11. Were all samples placed in the proper containers for the requested analyses?		<input checked="" type="radio"/> YES	NO
12. Are all samples within holding times for the requested analyses?		<input checked="" type="radio"/> YES	NO
13. Were all sample containers received intact? (not broken or leaking, etc.)		<input checked="" type="radio"/> YES	NO
14. Are all samples requiring no headspace (VOC, GRO, RSK/MEE, Rx CN/S, radon) headspace free? Size of bubble: _____ < green pea _____ > green pea	<input checked="" type="radio"/> N/A	YES	NO
15. Do perchlorate LCMS-MS samples have headspace? (at least 1/3 of container required)	<input checked="" type="radio"/> N/A	YES	NO
16. Were samples checked for and free from the presence of residual chlorine? (Applicable when PM has indicated samples are from a chlorinated water source; note if field preservation with sodium thiosulfate was not observed.)	<input checked="" type="radio"/> N/A	YES	NO
17. Were the samples shipped on ice?		YES	<input checked="" type="radio"/> NO
18. Were cooler temperatures measured at 0.1-6.0°C? IR gun used*: #2 #4		<input checked="" type="radio"/> RAD ONLY	<input checked="" type="radio"/> YES <input checked="" type="radio"/> NO
Cooler #: <u>1</u>			
Temperature (°C): <u>Amb</u>			
No. of custody seals on cooler: <u>2</u>			
DOT Survey/Acceptance Information	External µR/hr reading: <u>12</u>		
	Background µR/hr reading: <u>13</u>		
Were external µR/hr readings ≤ two times background and within DOT acceptance criteria? <input checked="" type="radio"/> YES <input type="radio"/> NO / NA (If no, see Form 008.)			

Additional Information: PROVIDE DETAILS BELOW FOR A NO RESPONSE TO ANY QUESTION ABOVE, EXCEPT #1 AND #16

- ① SU-ALL-COMP (SU01-COMP)
- ② SU-ALL-COMP (SU02-TOP-COMP)
- ③ SU-ALL-COMP (SU02-BOTTOM-COMP)
- ④ SU-ALL-COMP (SU03-COMP)
- ⑤ SU-ALL-COMP (REF-COMP)

If applicable, was the client contacted? YES / NO / NA Contact: \_\_\_\_\_ Date/Time: \_\_\_\_\_

Project Manager Signature / Date: [Signature] 12/19/09

\*IR Gun #2: Oakton, SN 29922500201-0066

\*IR Gun #4: Oakton, SN 2372220101-0002

From: Origin ID: ODMA (410) 332-8177  
Mike Barsa  
CABRERA SERVICES  
103 E. Mount Royal Ave  
Ste 2B  
Baltimore, MD 21202



J09300907312023

Ship Date: 18DEC09  
ActWgt: 2.0 LB  
CAD: 4239785/INET9090  
Account#: S \*\*\*\*\*

Delivery Address Bar Code



Ref # 08-3800.04 Task 200  
Invoice #  
PO #  
Dept #

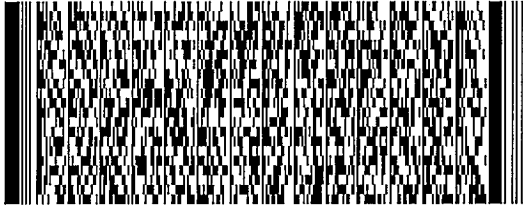
12/18/09

SHIP TO: (970) 490-1511 BILL SENDER  
Lance Steere  
ALS-Paragon  
225 COMMERCE DR

FORT COLLINS, CO 80524

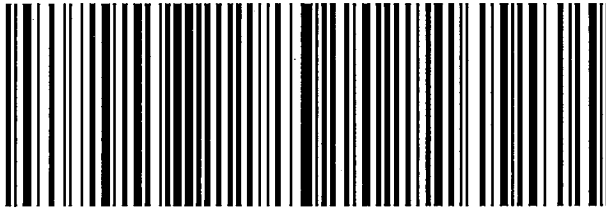
MON - 21DEC A2  
STANDARD OVERNIGHT

TRK# 7931 1700 1376  
0201



NX FTCA

80524  
CO-US  
DEN



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1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
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