	Asbestos B	ulk Chain of Cust	tody	
DeI 505 Port	n: Laboratory Lisle Associates LTD 0 S. Sprinkle Rd. tage, MI 49002 ne (269) 373-4500 / Fax (269) 3			
Client P.O. #: _		Phone Number:		
Client Name:		Fax Number:	Fax Number:	
Address:		Project Site:		
_		Contact Person:		
Sample Number	er Sample Description	Lo	Location Sampled	
Date Sample(s) S	ent to Lab:	Same Day 1 Bu	usiness Day 2-5 Business Days	
Comments:		Total Number of Sample	es:	
Relinquished by:		Date:	Time:	
Received by:		Date:	Time:	
Relinquished by:		Date:	Time:	
Received by:		Date:	Time:	
How do you	want to receive your re	eport?	Fax Mail	
		□emai1		

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