



Sample Identification Record
North Dakota Department of Health
Division of Laboratory Services–Chemistry

Telephone: 701.328.6140
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Preservation: Yes <input type="checkbox"/>	Temperature:
Initials:	

Sample Collection/Billing Information							
Account #		Project Code:		Project Description:			
Collected By:							
Analyte Groups:			Collection Method:		Matrix:		
					Water		
For Laboratory Use Only Lab ID:	Site ID:		Site Description:			Temp.	DO
	Date Collected:	Time Collected:	Depth (m):	Comments:		SC	pH
	Site ID:		Site Description:			Temp.	DO
	Date Collected:	Time Collected:	Depth (m):	Comments:		SC	pH
	Site ID:		Site Description:			Temp.	DO
	Date Collected:	Time Collected:	Depth (m):	Comments:		SC	pH
	Site ID:		Site Description:			Temp.	DO
	Date Collected:	Time Collected:	Depth (m):	Comments:		SC	pH
	Site ID:		Site Description:			Temp.	DO
	Date Collected:	Time Collected:	Depth (m):	Comments:		SC	pH
	Site ID:		Site Description:			Temp.	DO
	Date Collected:	Time Collected:	Depth (m):	Comments:		SC	pH