



To be completed by CSL:

Work Order # \_\_\_\_\_

Rec. by: \_\_\_\_\_

Date/Time Rec.: \_\_\_\_\_

Carrier: FedEx UPS DHL

Other: \_\_\_\_\_

## Sample Submittal Form

### Report Information

Info. has changed.

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

Send Reports by:  Email  Fax

### Billing Information

Info. has changed.

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

PO #: \_\_\_\_\_

Turnaround Time Required:  Standard  3 Day Rush\*  Next Day Rush\*

\*Rush fees will apply. Please check with the lab on the availability of rush turnaround.

### Sample # 1

Product ID	Matrix	Serving Size	Report Units	CSL #	
<b>Analysis/Spec.</b>	<input type="checkbox"/> Bismuth _____	<input type="checkbox"/> Iron _____	<input type="checkbox"/> Molybdenum _____	<input type="checkbox"/> Sodium _____	<input type="checkbox"/> Total Quant _____
<input type="checkbox"/> Aluminum _____	<input type="checkbox"/> Cadmium _____	<input type="checkbox"/> Lead _____	<input type="checkbox"/> Nickel _____	<input type="checkbox"/> Thallium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Antimony _____	<input type="checkbox"/> Calcium _____	<input type="checkbox"/> Magnesium _____	<input type="checkbox"/> Potassium _____	<input type="checkbox"/> Tin _____	<input type="checkbox"/> _____
<input type="checkbox"/> Arsenic _____	<input type="checkbox"/> Chromium _____	<input type="checkbox"/> Manganese _____	<input type="checkbox"/> Selenium _____	<input type="checkbox"/> Vanadium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Barium _____	<input type="checkbox"/> Copper _____	<input type="checkbox"/> Mercury _____	<input type="checkbox"/> Silver _____	<input type="checkbox"/> Zinc _____	<input type="checkbox"/> _____
<input type="checkbox"/> Beryllium _____					

### Sample # 2

Product ID	Matrix	Serving Size	Report Units	CSL #	
<b>Analysis/Spec.</b>	<input type="checkbox"/> Bismuth _____	<input type="checkbox"/> Iron _____	<input type="checkbox"/> Molybdenum _____	<input type="checkbox"/> Sodium _____	<input type="checkbox"/> Total Quant _____
<input type="checkbox"/> Aluminum _____	<input type="checkbox"/> Cadmium _____	<input type="checkbox"/> Lead _____	<input type="checkbox"/> Nickel _____	<input type="checkbox"/> Thallium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Antimony _____	<input type="checkbox"/> Calcium _____	<input type="checkbox"/> Magnesium _____	<input type="checkbox"/> Potassium _____	<input type="checkbox"/> Tin _____	<input type="checkbox"/> _____
<input type="checkbox"/> Arsenic _____	<input type="checkbox"/> Chromium _____	<input type="checkbox"/> Manganese _____	<input type="checkbox"/> Selenium _____	<input type="checkbox"/> Vanadium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Barium _____	<input type="checkbox"/> Copper _____	<input type="checkbox"/> Mercury _____	<input type="checkbox"/> Silver _____	<input type="checkbox"/> Zinc _____	<input type="checkbox"/> _____
<input type="checkbox"/> Beryllium _____					

**Sample Submittal Form-Page 2****Sample # 3**

<b>Product ID</b>	<b>Matrix</b>	<b>Serving Size</b>	<b>Report Units</b>	<b>CSL #</b>	
<b>Analysis/Spec.</b>					
<input type="checkbox"/> Aluminum _____	<input type="checkbox"/> Bismuth _____	<input type="checkbox"/> Iron _____	<input type="checkbox"/> Molybdenum _____	<input type="checkbox"/> Sodium _____	<input type="checkbox"/> Total Quant _____
<input type="checkbox"/> Antimony _____	<input type="checkbox"/> Cadmium _____	<input type="checkbox"/> Lead _____	<input type="checkbox"/> Nickel _____	<input type="checkbox"/> Thallium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Arsenic _____	<input type="checkbox"/> Calcium _____	<input type="checkbox"/> Magnesium _____	<input type="checkbox"/> Potassium _____	<input type="checkbox"/> Tin _____	<input type="checkbox"/> _____
<input type="checkbox"/> Barium _____	<input type="checkbox"/> Chromium _____	<input type="checkbox"/> Manganese _____	<input type="checkbox"/> Selenium _____	<input type="checkbox"/> Vanadium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Beryllium _____	<input type="checkbox"/> Copper _____	<input type="checkbox"/> Mercury _____	<input type="checkbox"/> Silver _____	<input type="checkbox"/> Zinc _____	<input type="checkbox"/> _____

**Sample # 4**

<b>Product ID</b>	<b>Matrix</b>	<b>Serving Size</b>	<b>Report Units</b>	<b>CSL #</b>	
<b>Analysis/Spec.</b>					
<input type="checkbox"/> Aluminum _____	<input type="checkbox"/> Bismuth _____	<input type="checkbox"/> Iron _____	<input type="checkbox"/> Molybdenum _____	<input type="checkbox"/> Sodium _____	<input type="checkbox"/> Total Quant _____
<input type="checkbox"/> Antimony _____	<input type="checkbox"/> Cadmium _____	<input type="checkbox"/> Lead _____	<input type="checkbox"/> Nickel _____	<input type="checkbox"/> Thallium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Arsenic _____	<input type="checkbox"/> Calcium _____	<input type="checkbox"/> Magnesium _____	<input type="checkbox"/> Potassium _____	<input type="checkbox"/> Tin _____	<input type="checkbox"/> _____
<input type="checkbox"/> Barium _____	<input type="checkbox"/> Chromium _____	<input type="checkbox"/> Manganese _____	<input type="checkbox"/> Selenium _____	<input type="checkbox"/> Vanadium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Beryllium _____	<input type="checkbox"/> Copper _____	<input type="checkbox"/> Mercury _____	<input type="checkbox"/> Silver _____	<input type="checkbox"/> Zinc _____	<input type="checkbox"/> _____

**Sample # 5**

<b>Product ID</b>	<b>Matrix</b>	<b>Serving Size</b>	<b>Report Units</b>	<b>CSL #</b>	
<b>Analysis/Spec.</b>					
<input type="checkbox"/> Aluminum _____	<input type="checkbox"/> Bismuth _____	<input type="checkbox"/> Iron _____	<input type="checkbox"/> Molybdenum _____	<input type="checkbox"/> Sodium _____	<input type="checkbox"/> Total Quant _____
<input type="checkbox"/> Antimony _____	<input type="checkbox"/> Cadmium _____	<input type="checkbox"/> Lead _____	<input type="checkbox"/> Nickel _____	<input type="checkbox"/> Thallium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Arsenic _____	<input type="checkbox"/> Calcium _____	<input type="checkbox"/> Magnesium _____	<input type="checkbox"/> Potassium _____	<input type="checkbox"/> Tin _____	<input type="checkbox"/> _____
<input type="checkbox"/> Barium _____	<input type="checkbox"/> Chromium _____	<input type="checkbox"/> Manganese _____	<input type="checkbox"/> Selenium _____	<input type="checkbox"/> Vanadium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Beryllium _____	<input type="checkbox"/> Copper _____	<input type="checkbox"/> Mercury _____	<input type="checkbox"/> Silver _____	<input type="checkbox"/> Zinc _____	<input type="checkbox"/> _____

**Sample # 6**

<b>Product ID</b>	<b>Matrix</b>	<b>Serving Size</b>	<b>Report Units</b>	<b>CSL #</b>	
<b>Analysis/Spec.</b>					
<input type="checkbox"/> Aluminum _____	<input type="checkbox"/> Bismuth _____	<input type="checkbox"/> Iron _____	<input type="checkbox"/> Molybdenum _____	<input type="checkbox"/> Sodium _____	<input type="checkbox"/> Total Quant _____
<input type="checkbox"/> Antimony _____	<input type="checkbox"/> Cadmium _____	<input type="checkbox"/> Lead _____	<input type="checkbox"/> Nickel _____	<input type="checkbox"/> Thallium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Arsenic _____	<input type="checkbox"/> Calcium _____	<input type="checkbox"/> Magnesium _____	<input type="checkbox"/> Potassium _____	<input type="checkbox"/> Tin _____	<input type="checkbox"/> _____
<input type="checkbox"/> Barium _____	<input type="checkbox"/> Chromium _____	<input type="checkbox"/> Manganese _____	<input type="checkbox"/> Selenium _____	<input type="checkbox"/> Vanadium _____	<input type="checkbox"/> _____
<input type="checkbox"/> Beryllium _____	<input type="checkbox"/> Copper _____	<input type="checkbox"/> Mercury _____	<input type="checkbox"/> Silver _____	<input type="checkbox"/> Zinc _____	<input type="checkbox"/> _____