Chain of Custody Record-Sample Submission Form

Please fill in the information requested in the spaces provided below. One line item for each sample submitted

Midwest COMPLIANCE LABORATORIES

Client Information		Billing Information:		PO Number	For Internal Use Only
Company Name:					**Year:**
Contact Name					
Address:					**Client Code:**
City, State Zip:					
Phone Number:					Page _____ of _____
Email Address:					

SHIP TO:
Midwest Compliance Labs
2458 N. Chamberlain Street
Terre Haute, IN 47805
812-872-2221

Specifications:
☐ USP
☐ FCC
☐ CLIENT
☐ OTHER

Turn Time: (Rush times will incur a surcharge and must be pre-approved by the lab)
Standard
Rush **Specify "Need By" date**_____
Other:Describe

For Internal Lab Use Only-SAMPLE ID	Client Sample ID/Lot Number/ Description	Collection Information: Date	Collection Information: Time	Container: Quantity	Test Requested	COMMENTS

Additional Information Required for Stability Study Request

Storage: ☐ Controlled Room Temp (25 ℃ ± 2°C /60%RH ± 5%) ☐ Accelerated (40 °C ± 2°C /75%RH ± 5%) ☐ Other (Please define):

Stability Intervals Requested (Please list):

Submitted By:	Date/Time	Received By	Date/Time	Sample meets MC Labs Acceptance Criteria [ ] YES [ ] NO
Confirmation of Sample Receipt Required [ ] YES [ ] NO		Confirmation Transmitted To:		Received Sample at lab on Ice [ ] YES [ ] NO

All samples submitted to Midwest Compliance Laboratories for analysis are accepted on a custodial basis only. Ownership of the material remains with the client submitting the samples. Midwest Compliance Laboratories reserves the right to return unused sample portions.