

SAMPLE LOG-IN SHEET  
FORM DC-1

Lab Name				Page ___ of ___	
Received By (Print Name)				Log-in Date	
Received By (Signature)					
Case Number		Sample Delivery Group No.			Mod. Ref. No.
Remarks:		Corresponding			Remarks: Condition of Sample Shipment, etc.
		EPA Sample #	Sample Tag #	Assigned Lab #	
1. Custody Seal(s)	Present/Absent* Intact/Broken				
2. Custody Seal Nos.	_____				
3. Traffic Reports/ Chain of Custody Records (TR/COCs) or Packing Lists	Present/Absent*				
4. Airbill	Airbill/Sticker Present/Absent*				
5. Airbill No.	_____				
6. Sample Tags	Present/Absent*				
Sample Tag Numbers	Listed/Not Listed on Chain-of- Custody				
7. Sample Condition	Intact/Broken*/ Leaking				
8. Cooler Temperature Indicator Bottle	Present/Absent				
9. Cooler Temperature	_____				
10. Does information on TR/COCs and sample tags agree?	Yes/No*				
11. Date Received at Laboratory	_____				
12. Time Received	_____				
Sample Transfer					
Fraction	Fraction				
Area #	Area #				
By	By				
On	On				

\* Contact SMO and attach record of resolution.

Reviewed By	Logbook No.
Date	Logbook Page No.