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Document Title

Test Request Submission

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Analytical Chemistry Sample Submission Form

Company Name:	Submission Date:
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Sample Description:

Sample Batch/Lot#:	Purchase Order No.:
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Test Reports Provided To (Contact Name/Email):

Sample Type: <input type="checkbox"/> Bulk <input type="checkbox"/> FG <input type="checkbox"/> RM Samples Tested as: <input type="checkbox"/> Individual <input type="checkbox"/> Composite	Rush Request*: <input type="checkbox"/> 24 Hours <input type="checkbox"/> 2-3 Days <input type="checkbox"/> 3-5 Days <input type="checkbox"/> 5-7 Days
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(Lab Use Only) Lab ID#	Test Requested (Analyte)	Label Claim	Specification**	(Lab Use Only)		
				Results	Analyst	Date

Additional Comments:

Client Approval: _____
 Print Name, Signature, Position

Notes:

- * Due to method requirements not all tests can be expedited. Routine analytical test submissions have a 2-3 day turnaround time. Contact ACCU Bio-Chem Labs for additional information.
- ** If the specification range is not provided, an Out of Specification Report cannot be issued.
- Analytical samples may need to be validated per FDA requirements. A validation will be performed upon client request.

Lab Use Only		
Verified By:	Date:	Shared Sample: <input type="checkbox"/> Yes <input type="checkbox"/> No
Sample Condition: <input type="checkbox"/> Good <input type="checkbox"/> Not Good – If not good, explain:		