

**APPENDIX D**  
**Chain-of-Custody Forms**

4124 (0807)

Client: WALTON OSEAR - TECHLAB, INC. Project Manager: WALTON OSEAR Chain of Custody Number: 4003348  
 Address: 1001 DICK LAUND AV Telephone Number (Area Code)/Fax Number: 713-734-0000 Lab Number: 1 of 1  
 City: DALLAS State: TX Zip Code: 75207 Lab Contact: [Blank]

Site Contact: [Blank] Lab Contact: [Blank] Analysis (Attach list if more space is needed): [Blank]  
 Carrier/Waybill Number: PTXK 4411112 213 Special Instructions/Conditions of Receipt: [Blank]

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix						Containers & Preservatives	Special Instructions/Conditions of Receipt																
			Air	Aqueous	Soil	Unpres.	H2SO4	HNO3			HCl	NaOH	ZnAc/NaOH													
GW-502	1/11/08	1030	X								X															
GW-503	1/11/08	940	X								X															
GW-504	1/11/08	835	X								X															

Possible Hazard Identification:  Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client  Sample Disposal  Disposal By Lab  Archive For  Months  Months  Months

Turn Around Time Required:  24 Hours  48 Hours  7 Days  14 Days  21 Days  Other

QC Requirements (Specify): SEND RESULTS TO LARA DAVENPORT 762.818.3254

1. Relinquished By: WALTON OSEAR Date: 1/11/08 Time: 1700

2. Relinquished By: [Blank] Date: [Blank] Time: [Blank]

3. Relinquished By: [Blank] Date: [Blank] Time: [Blank]

Comments: [Blank]

DISTRIBUTION: WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy

4124 (0807)

**Client:** [Handwritten] ...  
**Address:** [Handwritten] ...  
**City:** [Handwritten] ...  
**State:** TX **Zip Code:** 75207  
**Project Name and Location (State):** [Handwritten] ...  
**Contract/Purchase Order/Quote No.:** [Handwritten] ...

**Project Manager:** [Handwritten] ...  
**Telephone Number (Area Code)/Fax Number:** [Handwritten] ...  
**Site Contact:** [Handwritten] ...  
**Lab Contact:** [Handwritten] ...  
**Carrier/Waybill Number:** [Handwritten] ...

**Chain of Custody Number:** [Handwritten] ...  
**Date:** 11/1/08  
**Lab Number:** [Handwritten] ...  
**Page:** 1 of [Handwritten] ...

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix						Containers & Preservatives						Special Instructions/ Conditions of Receipt											
			Air	Aqueous	Sed	Soil	Unpres.	H2SO4	HNO3	HCl	HOEN /ZAP	HOEN														
GW 504	11/01/08	1530	X											X	X	X										
GW 507	11/01/08	1405	X											X	X	X										

**Sample Disposal:**  
 Return To Client  Unknown  Other  
 Non-Hazard  Flammable  Skin Irritant  Poison B  24 Hours  48 Hours  7 Days  14 Days  21 Days  
 Disposal By Lab  Archive For \_\_\_ Months longer than 1 month  
**QC Requirements (Specify):** [Handwritten] ...

**1. Relinquished By:** [Handwritten] ... **Date:** 11/01/08 **Time:** [Handwritten] ...  
**2. Relinquished By:** [Handwritten] ... **Date:** [Handwritten] ... **Time:** [Handwritten] ...  
**3. Relinquished By:** [Handwritten] ... **Date:** [Handwritten] ... **Time:** [Handwritten] ...

**Comments:** [Handwritten] ...

**DISTRIBUTION:** WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy



Severn Trent Laboratories, Inc.

Chain of Custody Record

4124 (0807)

Client: **TELLMANN, INC.** Project Manager: **WALLY CRANE** Chain of Custody Number: **202327**

Address: **1414 DAK WALKER AV SALT LAKE CITY UT 84115** Telephone Number (Area Code)/Fax Number: **972.214.0100** Lab Number: **1**

City: **DALLAS TX** Zip Code: **75207** Site Contact: **FRANK STALL** Lab Contact: **FRANK STALL** Page **1** of **1**

Project Name and Location (State): **SUMMITTSVILLE/ALABAMA**

Contract/Purchase Order/Quote No.: **76952**

Carrier/Waybill Number: **FEDEX 5011 12537411**

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix					Containers & Preservatives	Special Instructions/ Conditions of Receipt									
			Aqueous	Sed	Soil	Ungres	H2SO4			HNO3	HCl	NaOH	ZnAc					
<b>CW-104</b>	<b>11/10/08</b>	<b>10:58</b>	<input checked="" type="checkbox"/>					<b>1</b>										
<b>CW-105</b>	<b>11/10/08</b>	<b>11:35</b>	<input checked="" type="checkbox"/>					<b>1</b>										
<b>CW-106</b>	<b>11/10/08</b>	<b>11:13</b>	<input checked="" type="checkbox"/>					<b>1</b>										

Possible Hazard Identification  
 Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months  (A fee may be assessed if samples are retained longer than 1 month)

Turn Around Time Required  
 24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

QC Requirements (Specify)

1. Relinquished By **WALLY CRANE** Date **11/10/08** Time **17:00**

2. Relinquished By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

3. Relinquished By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Comments

4124 (0807)

Client: **TICORAW INC.** Project Manager: \_\_\_\_\_ Date: 01/10/2008 Chain of Custody Number: 4083344  
 Address: 1411 OAK LAWN AV Telephone Number (Area Code)/Fax Number: \_\_\_\_\_ Lab Number: \_\_\_\_\_ Page: 1 of 1  
 City: DALLAS TX 75247 Site Contact: \_\_\_\_\_ Lab Contact: \_\_\_\_\_  
 Project Name and Location (State): TRAMMERS/MIKANAD Carrier/Waybill Number: 5017 301111 7476  
 Contract/Purchase Order/Quote No.: 104128

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives				Special Instructions/ Conditions of Receipt			
			Aqueous	Sed	Soil	Unpres.	H2SO4	HNO3	HCl	H2O2/NaOH				
<u>GW-201</u>	<u>1/7/08</u>	<u>1716</u>	X			Y								
<u>PD-01</u>	<u>1/7/08</u>	<u>1246</u>	X			Y								
<u>GW-509</u>	<u>1/7/08</u>	<u>1235</u>	X			Y								

Possible Hazard Identification  
 Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months (A fee may be assessed if samples are retained longer than 1 month)  
 Turn Around Time Required:  24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_  
 1. Relinquished By: Wally O'Pean Date: 1/10/2008 12:00 Time: \_\_\_\_\_  
 2. Relinquished By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 3. Relinquished By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

OC Requirements (Specify): SAND RESULDS TO TARA DAVENPORT 065.016.3291

Comments: \_\_\_\_\_

4124 (0807)  
Client

Project Manager: Wendy Clark Date: 01/10/2008 Chain of Custody Number: 11111111

Address: 1111 CAPTAIN AV Telephone Number (Area Code)/Fax Number: 11111111/111111 Lab Number: 111111 Page 1 of 1

City: DALLAS TX 75201 Site Contact: 11111111 Lab Contact: 11111111

Project Name and Location (State): DALLAS TEXAS Carrier/Waybill Number: FBI 3619 7512 1153

Contract/Purchase Order/Quote No.: 16952

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix					Containers & Preservatives					Special Instructions/ Conditions of Receipt					
			Air	Aqueous	Sed	Soil	Unpres	H2SO4	HNO3	HCl	HOAc	ZnAc/HOAc						
<u>GW-D02</u>	<u>1/9/08</u>	<u>1228</u>	<u>X</u>					<u>1</u>										
<u>GW-D02L</u>	<u>1/9/08</u>	<u>1105</u>	<u>X</u>					<u>1</u>										
<u>GW-D01</u>	<u>1/9/08</u>	<u>1131</u>	<u>X</u>					<u>1</u>										

Possible Hazard Identification:  
 Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client  Disposal By Lab  Archive For  Months  Months longer than 1 month

Turn Around Time Required:  
 24 Hours  48 Hours  7 Days  14 Days  21 Days  Other

QC Requirements (Specify): SEND TO LAB BY JANA DAVISON 703.98.3051

1. Relinquished By: Wendy Clark Date: 1/10/08 Time: 12:00  
 2. Relinquished By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 3. Relinquished By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Comments: \_\_\_\_\_

**Chain of  
Custody Record**

4124 (0807)

Client: TECHLABS, INC. Project Manager: MAURICE O'BRYEN Date: 01/10/2008 Chain of Custody Number: 003328

Address: 1144 CAN LAMUN AV Telephone Number (Area Code)/Fax Number: 1144 606 1441/1144 606 1441 Lab Number: 1 of 1

City: DALLAS TX 75247 Site Contact: MAURICE O'BRYEN Lab Contact: MAURICE O'BRYEN Analysis (Attach list if more space is needed):

Project Name and Location (State): 1144 CAN LAMUN AV DALLAS TX 75247 Carrier/Waybill Number: FDX 6413337367 Special Instructions/Conditions of Receipt:

Contract/Purchase Order/Quote No.: 16933

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives													
			Air	Aqueous	Sed	Soil	Unpres	H2SO4	HNO3	HCl	NaOH	ZnAc								
<u>QV - P22</u>	<u>1/1/08</u>	<u>1300</u>	<u>X</u>				<u>4</u>													
<u>SW - P01</u>	<u>1/1/08</u>	<u>1500</u>	<u>X</u>				<u>8</u>													

Possible Hazard Identification:  
 Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months  Sample Disposal (A fee may be assessed if samples are retained longer than 1 month)  
 24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

QC Requirements (Specify):  
 1. Relinquished By MAURICE O'BRYEN Date 1/10/08 Time 12:00  
 2. Relinquished By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
 3. Relinquished By \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Comments:

Client 4124 (0807) TREN LAW INC.		Project Manager WALTON		Date 11/1/08		Chain of Custody Number 100720					
Address 1444 CORK LAWN AV		Telephone Number (Area Code)/Fax Number 972 232 2222		Lab Number 100720		Page <u>1</u> of <u>1</u>					
City DALLAS		State TX		Zip Code 75207		Analysis (Attach list if more space is needed)					
Project Name and Location (State) SHERMAN/ARROWOOD		Site Contact CARRIER		Lab Contact CARRIER		Special Instructions/ Conditions of Receipt					
Contract/Purchase Order/Quote No. 76732		Carrier/Waybill Number 8619		Carrier/Waybill Number 8619				Special Instructions/ Conditions of Receipt			
Sample I.D. No. and Description (Containers for each sample may be combined on one line)		Date		Time						Matrix	
										Containers & Preservatives	
						Air <input type="checkbox"/> Aqueous <input type="checkbox"/> Sed <input type="checkbox"/> Soil <input type="checkbox"/> Unpres. <input type="checkbox"/> H2SO4 <input type="checkbox"/> HNO3 <input type="checkbox"/> HCl <input type="checkbox"/> NaOH <input type="checkbox"/> ZnAc <input type="checkbox"/> NaOH <input type="checkbox"/>					
Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown <input type="checkbox"/> Other		Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months		(A fee may be assessed if samples are retained longer than 1 month)							
Turn-Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days		GC Requirements (Specify)									
1. Relinquished By WALTON		Date 11/1/08		Time 11:00		1. Received By JANA DAWSON (30)					
2. Relinquished By		Date		Time		2. Received By					
3. Relinquished By		Date		Time		3. Received By					
Comments											



**Chain of  
Custody Record**

4124 (0607)

**Client**  
 ECLEWORTH INC.  
 1444 OAK TOWN AV.  
 DALLAS TX 75207

**Project Manager**  
 WALLY BAKER

**Date** 6/29/2008

**Chain of Custody Number**  
 2008-0001

**Address**  
 1444 OAK TOWN AV.  
 DALLAS TX 75207

**Telephone Number (Area Code)/Fax Number**  
 972.341.0000

**Lab Number**

**Page** 1 of 1

**Site Contact**  
 WALLY BAKER

**Lab Contact**

**Carrier/Waybill Number**  
 6000

**Analysis (Attach list if more space is needed)**

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix						Containers & Preservatives						Special Instructions/ Conditions of Receipt					
			Air	Soil	Unpres.	H2SO4	HNO3	HCl	HNO3	ZnAc	HNO3	HOAc								
SW-2076	11/1/07	10:00																		
SW-2077	11/1/07	10:00																		
EQUIPMENT BLANK	11/1/07	11:00																		

**Project Name and Location (State)**  
 TOWNALEX (ALCONA)

**Contract/Purchase Order/Quote No.**  
 76120

**Possible Hazard Identification**  
 Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months  (A fee may be assessed if samples are retained longer than 1 month)

**Turn Around Time Required**  
 24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

**GC Requirements (Specify)**

**Sample Disposal**  
 Return To Client

**1. Relinquished By** Wally Baker **Date** 11/9/08 **Time** 1300

**2. Relinquished By** \_\_\_\_\_ **Date** \_\_\_\_\_ **Time** \_\_\_\_\_

**3. Relinquished By** \_\_\_\_\_ **Date** \_\_\_\_\_ **Time** \_\_\_\_\_

**Comments**

**DISTRIBUTION:** WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy

Chain of Custody Record

TestAmerica Laboratories, Inc.

<p>Your Company Name here <b>TECHLAW, INC.</b>          Address <b>760 N. ST. PAUL ST. STE 600</b>          City/State/Zip <b>DALLAS, TX 75207</b> Phone <b>214.953.6045</b>  <b>1444 Oak Lawn Av.</b> Phone <b>214.953.6045</b>          Dallas, TX 75207 FAX <b>214.754.0819</b>          Project Name: <b>Shawnee</b>          Site:          P.O.#</p>		<p>Client Contact          Project Manager: <b>D. Dally, Director</b>          Tel/Fax: <b>972/754-0638</b>          Analysis Turnaround Time          Calendar (C) or Work Days (W)  <input type="checkbox"/> 2 weeks  <input type="checkbox"/> 1 week  <input type="checkbox"/> 2 days  <input type="checkbox"/> 1 day</p>		<p>Site Contact:          Date: <b>1/8/08</b>          Carrier:          Lab Contract:          Date/Time:          Date/Time:          Date/Time:</p>							
<p>Sample Identification</p>		<p>Sample Date</p>		<p>Sample Time</p>		<p>Sample Type</p>		<p>Matrix</p>		<p># of Cont.</p>	
<p><del>NEG</del> DW-03 GW - D03</p>		<p>1/7/08</p>		<p>1605</p>		<p>GW</p>		<p></p>		<p>5</p>	
<p><del>NEG</del> DW-03L GW - D03L</p>		<p>1/7/08</p>		<p>1700</p>		<p>GW</p>		<p></p>		<p>5</p>	
<p><del>NEG</del> DW-03L GW - 508</p>		<p>1/7/08</p>		<p>1758</p>		<p>GW</p>		<p></p>		<p>5</p>	
<p><del>NEG</del> GW - D07</p>		<p>1/7/08</p>		<p>848</p>		<p>GW</p>		<p></p>		<p>5</p>	
<p>Sample Specific Notes:  <b>Test #4 preservative</b>          15 V          15 11          11 10</p>											
<p>Preservation Used: (1=Ice, 2=HCl; 3=H2SO4; 4=HNO3; 5=NaOH; 6=Other)          Possible Hazard Identification  <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown</p>											
<p>Special Instructions/QC Requirements &amp; Comments:  <b>Send Results to Jane Dawson (705) 818-3254</b></p>											
<p>Relinquished by: <b>Wallace Otker</b></p>		<p>Company: <b>TechLaw, Inc</b></p>		<p>Date/Time: <b>1/8/08/1400</b></p>		<p>Received by:</p>		<p>Company:</p>		<p>Date/Time:</p>	
<p>Relinquished by:</p>		<p>Company:</p>		<p>Date/Time:</p>		<p>Received by:</p>		<p>Company:</p>		<p>Date/Time:</p>	
<p>Relinquished by:</p>		<p>Company:</p>		<p>Date/Time:</p>		<p>Received by:</p>		<p>Company:</p>		<p>Date/Time:</p>	

**Chain of Custody Record**

4124 (0807) <small>Client</small> Wally O'Rear: TechLaw, Inc.	<small>Project Manager</small> Wally O'Rear	<small>Date</small> 2-12-08	<small>Chain of Custody Number</small> 403353
<small>Address</small> 1444 Oak Lawn AV	<small>Telephone Number (Area Code)/Fax Number</small> 972-754-0638	<small>Lab Number</small>	<small>Page</small> 1 <small>of</small> 1

<small>City</small> Dallas	<small>State</small> TX	<small>Zip Code</small> 75207	<small>Site Contact</small> Wally O'Rear	<small>Lab Contact</small>	<small>Analysis (Attach list if more space is needed)</small>  Explosives Heavy Metals/Arsenic Perchlorate	<small>Special Instructions/ Conditions of Receipt</small>
<small>Project Name and Location (State)</small> Shumaker/Arkansas			<small>Carrier/Waybill Number</small> FedEx 8619 7392 7430			
<small>Contract/Purchase Order/Quote No.</small> 76952						

Sample I.D. No. and Description <small>(Containers for each sample may be combined on one line)</small>	Date	Time	Matrix				Containers & Preservatives																						
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc/ NaOH																	
SW-27	2-12-08	1217	X				4	1					X	X	X													ice MS	
SW-37	2-12-08	1230	X				4	1					X	X	X													ice	

<small>Possible Hazard Identification</small> <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	<small>Sample Disposal</small> <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	<small>(A fee may be assessed if samples are retained longer than 1 month)</small>
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<small>Turn Around Time Required</small> <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____	<small>QC Requirements (Specify)</small> Send Results to Julie Dawson 703-818-3254																		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%;"><small>1. Relinquished By</small> Wally O'Rear</td> <td style="width:15%;"><small>Date</small> 2/12/08</td> <td style="width:15%;"><small>Time</small> 1400</td> <td style="width:15%;"><small>1. Received By</small></td> <td style="width:15%;"><small>Date</small></td> <td style="width:10%;"><small>Time</small></td> </tr> <tr> <td><small>2. Relinquished By</small></td> <td><small>Date</small></td> <td><small>Time</small></td> <td><small>2. Received By</small></td> <td><small>Date</small></td> <td><small>Time</small></td> </tr> <tr> <td><small>3. Relinquished By</small></td> <td><small>Date</small></td> <td><small>Time</small></td> <td><small>3. Received By</small></td> <td><small>Date</small></td> <td><small>Time</small></td> </tr> </table>	<small>1. Relinquished By</small> Wally O'Rear	<small>Date</small> 2/12/08	<small>Time</small> 1400	<small>1. Received By</small>	<small>Date</small>	<small>Time</small>	<small>2. Relinquished By</small>	<small>Date</small>	<small>Time</small>	<small>2. Received By</small>	<small>Date</small>	<small>Time</small>	<small>3. Relinquished By</small>	<small>Date</small>	<small>Time</small>	<small>3. Received By</small>	<small>Date</small>	<small>Time</small>	
<small>1. Relinquished By</small> Wally O'Rear	<small>Date</small> 2/12/08	<small>Time</small> 1400	<small>1. Received By</small>	<small>Date</small>	<small>Time</small>														
<small>2. Relinquished By</small>	<small>Date</small>	<small>Time</small>	<small>2. Received By</small>	<small>Date</small>	<small>Time</small>														
<small>3. Relinquished By</small>	<small>Date</small>	<small>Time</small>	<small>3. Received By</small>	<small>Date</small>	<small>Time</small>														

Comments

# Chain of Custody Record

SEVERN  
TRENT

# STL

Severn Trent Laboratories, Inc.

4124 (0807)

Client: Wally O'Rear: Techlaw, Inc. Project Manager: Wally O'Rear Date: 2-12-08 Chain of Custody Number: 803357

Address: 1444 Oak Lawn Av. Telephone Number (Area Code)/Fax Number: 972-754-0638 Lab Number: \_\_\_\_\_

City: Dallas State: TX Zip Code: 75207 Site Contact: Wally O'Rear Lab Contact: \_\_\_\_\_ Page 1 of 1

Project Name and Location (State): Shuntac / Arkansas Carrier/Waybill Number: FedEx 5019 9392 7316

Contract/Purchase Order/Quote No.: 76952 Analysis (Attach list if more space is needed):

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Explosives	Mercury	Pesticides	Special Instructions/ Conditions of Receipt	
			Air	Aqueous	Sed.	Soil	Unpres.	H <sub>2</sub> SO <sub>4</sub>	HNO <sub>3</sub>	HCl	NaOH	ZnAc/NaOH					
<u>SLW-20</u>	<u>2-12-08</u>	<u>1430</u>	X				4	1						X	X	X	ICC MS
<u>SLW-25</u>	<u>2-12-08</u>	<u>1405</u>	X				4	1						X	X	X	ICC
<u>SLW-36</u>	<u>2-12-08</u>	<u>1315</u>	X				4	1						X	X	X	ICC

Possible Hazard Identification:  Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown

Sample Disposal:  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months (A fee may be assessed if samples are retained longer than 1 month)

Turn Around Time Required:  24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

QC Requirements (Specify): Send Results to Jane Dawson 703-513-3254

1. Relinquished By: <u>Wally O'Rear</u>	Date: <u>2/13/08</u> Time: <u>1400</u>	1. Received By:	Date:	Time:
2. Relinquished By:	Date:	2. Received By:	Date:	Time:
3. Relinquished By:	Date:	3. Received By:	Date:	Time:

Comments:

**Chain of Custody Record**

SEVERN  
TRENT

**STL**

Severn Trent Laboratories, Inc.

4124 (0807)

Client: Wally O'Neer Techlaw Inc  
 Project Manager: Wally O'Neer  
 Date: 2-15-08  
 Chain of Custody Number: 401325  
 Address: 1444 Oak Lawn Av  
 Telephone Number (Area Code)/Fax Number: 972-754-0038  
 Lab Number: \_\_\_\_\_  
 Page: 1 of 1

City: Dallas  
 State: TX  
 Zip Code: 75207  
 Site Contact: Wally O'Neer  
 Lab Contact: \_\_\_\_\_  
 Project Name and Location (State): Shumaker / Arkansas  
 Carrier/Waybill Number: Fed Ex 8619 9392 7350  
 Analysis (Attach list if more space is needed)

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives							Explosives	Heavy Metals/ Mercury	Pesticide	Special Instructions/ Conditions of Receipt		
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2	NaOH						
SW-24	2/13/08	0825		X				4		1						X	X	X	
EP-02	2/17/08	1830		X				4		1						X	X	X	
SID-23	2/13/08	0800		X				4		1						X	X	X	

Possible Hazard Identification:  Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown  Return To Client

Sample Disposal:  Disposal By Lab  Archive For \_\_\_\_\_ Months (A fee may be assessed if samples are retained longer than 1 month)

Turn Around Time Required:  24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

QC Requirements (Specify): Send Res. Ms to Tina Dawson 703-818-3254

1. Relinquished By	Date	Time	1. Received By	Date	Time
Wally O'Neer	2/14/08	1400			
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments

DISTRIBUTION: WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy

**Chain of Custody Record**

**SEVERN  
TRENT**

**STL**

**Severn Trent Laboratories, Inc.**

4124 (0807)

**Client** Wally O'Rear Tech Law, Inc  
**Address** 1444 Oak Lawn AV  
**City** Dallas **State** TX **Zip Code** 75207  
**Project Name and Location (State)** Shumaker / Arkansas  
**Contract/Purchase Order/Quote No.** 76952

**Project Manager** Wally O'Rear  
**Telephone Number (Area Code)/Fax Number** 972-754-0638  
**Site Contact** Wally O'Rear  
**Carrier/Waybill Number** FedEx 861193127327

**Date** 2-13-08  
**Chain of Custody Number** 401323  
**Lab Number**  
**Page** 1 **of** 1

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Explosives	PCRA Metals	Mercury	Perchlorate	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt		
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc/NaOH								
SW-18	2/13/08	0930					4	1								X	X	X		Tce
SW-21	2/13/08	0910					4	1								X	X	X		Tce

**Possible Hazard Identification**  
 Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown

**Sample Disposal**  
 Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months (A fee may be assessed if samples are retained longer than 1 month)

**Turn Around Time Required**  
 24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

**QC Requirements (Specify)**  
Send results to Jana Dawson 703-518-3254

Relinquished By	Date	Time	Received By	Date	Time
Wally O'Rear	2/14/08	1400			

**Comments**

**DISTRIBUTION:** WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy



# Chain of Custody Record

4124 (0807)

Client <i>Wally O'Rear Tail Law Inc.</i>		Project Manager <i>Wally O'Rear</i>		Date <i>2-13-08</i>		Chain of Custody Number <i>401324</i>	
Address <i>1444 Oak Lawn Av</i>		Telephone Number (Area Code)/Fax Number <i>972-754-0638</i>		Lab Number		Page <i>1</i> of <i>1</i>	

City <i>Dallas</i>	State <i>TX</i>	Zip Code <i>75007</i>	Site Contact <i>Wally O'Rear</i>	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <i>Shumatec / Arkansas</i>			Carrier/Waybill Number <i>Fed EX 8619 1392 7360</i>			

Contract/Purchase Order/Quote No.  
*76952*

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives							Explosives	LMA Metals / Mercury	Pesticide
			Air	Aqueous	Sed.	Soil	Unpres.	H <sub>2</sub> SO <sub>4</sub>	HNO <sub>3</sub>	HCl	NaOH	ZnAc/NaOH				
<i>SW-15</i>	<i>2/13/08</i>	<i>1205</i>		<i>X</i>			<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>	
<i>SW-14</i>	<i>2/13/08</i>	<i>1150</i>		<i>X</i>			<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>	
<i>SW-12</i>	<i>2/13/08</i>	<i>1400</i>		<i>X</i>			<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>	
<i>SW-11</i>	<i>2/13/08</i>	<i>1425</i>		<i>X</i>			<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>	
<i>SW-77</i>	<i>2/12/08</i>	<i>0555</i>		<i>X</i>			<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>	

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	(A fee may be assessed if samples are retained longer than 1 month)
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____	QC Requirements (Specify) <i>Send Results to Tonia Dawson 703-818-3254</i>
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1. Relinquished By <i>Wally O'Rear</i>	Date <i>2/14/08</i>	Time <i>1400</i>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments



**Chain of  
Custody Record**

4124 (0807)

Client <i>Wally O'Rear, Tril Law Inc</i>		Project Manager <i>Wally O'Rear</i>		Date <i>2-13-08</i>	Chain of Custody Number <i>401326</i>
Address <i>1444 Oak Lawn Av</i>		Telephone Number (Area Code)/Fax Number <i>972-754-0036</i>		Lab Number	Page <i>1</i> of <i>1</i>

City <i>Dallas</i>	State <i>TX</i>	Zip Code <i>75207</i>	Site Contact <i>Wally O'Rear</i>	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <i>Shumaker / Arkansas</i>			Carrier/Waybill Number <i>Fed EX 8619 9392 7349</i>			
Contract/Purchase Order/Quote No. <i>70952</i>			Matrix			

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Explosives	Heavy Metals	Mercury	Archival	
			AP	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc					NaOH
<i>SW-13</i>	<i>2/13/08</i>	<i>1227</i>	<i>Y</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		
<i>SW-39</i>	<i>2/13/08</i>	<i>1310</i>	<i>Y</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		
<i>SW-10</i>	<i>2/13/08</i>	<i>1255</i>	<i>Y</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	(A fee may be assessed if samples are retained longer than 1 month)
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____	QC Requirements (Specify) <i>Send results to Jena Dawson 703-818-3254</i>
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1. Relinquished By <i>Wally O'Rear</i>	Date <i>2/14/08</i>	Time <i>1400</i>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments

DISTRIBUTION: WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy



# Chain of Custody Record

4124 (0807)

Client <i>Wally O'Rear TechLaw Inc.</i>			Project Manager <i>Wally O'Rear</i>				Date <i>2-14-08</i>	Chain of Custody Number <i>401327</i>		
Address <i>1444 Oak Lawn Av.</i>			Telephone Number (Area Code)/Fax Number <i>972-754-0638</i>				Lab Number	Page <i>1</i> of <i>1</i>		
City <i>Dallas</i>	State <i>Tx</i>	Zip Code <i>75207</i>	Site Contact <i>Wally O'Rear</i>		Lab Contact		Analysis (Attach list if more space is needed)			
Project Name and Location (State) <i>Shumaker Arkansas</i>			Carrier/Waybill Number <i>Fed Ex 3619 9392 7371</i>							
Contract/Purchase Order/Quote No. <i>76952</i>										Special Instructions/ Conditions of Receipt

Sample I.D. No. and Description <small>(Containers for each sample may be combined on one line)</small>	Date	Time	Matrix				Containers & Preservatives						Explosives	Other Metals	Pesticides	Analysis															
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc/NaOH																			
<i>SW-01</i>	<i>2-14-08</i>	<i>0955</i>	<i>X</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>																<i>ICC</i>
<i>SW-02</i>	<i>2-14-08</i>	<i>1015</i>	<i>X</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>															<i>ICC</i>	
<i>SW-03</i>	<i>2-14-08</i>	<i>0935</i>	<i>X</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>														<i>ICC</i>		

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown			Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months			(A fee may be assessed if samples are retained longer than 1 month)		
Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____			QC Requirements (Specify) <i>Send Results to Jana Dawson 703-818-3254</i>					
1. Relinquished By <i>Wally O'Rear</i>		Date <i>2/14/08</i>	Time <i>1400</i>		1. Received By		Date	Time
2. Relinquished By		Date	Time		2. Received By		Date	Time
3. Relinquished By		Date	Time		3. Received By		Date	Time
Comments								

**DISTRIBUTION:** WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy

# Chain of Custody Record

4124 (0807)

Client <b>Wally O'Rear : Tech Law, Inc.</b>	Project Manager <b>Wally O'Rear</b>	Date <b>2-11-08</b>	Chain of Custody Number <b>403350</b>
Address <b>1444 Oak Lawn AV</b>	Telephone Number (Area Code)/Fax Number <b>972-754-0638</b>	Lab Number	Page <b>1</b> of <b>1</b>

City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75207</b>	Site Contact <b>Wally O'Rear</b>	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <b>Shumaker Arkansas</b>			Carrier/Waybill Number <b>FedEx 1619 4392 7750</b>			

Contract/Purchase Order/Quote No. <b>76952</b>	Matrix	Containers & Preservatives
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Sample I.D. No. and Description <small>(Containers for each sample may be combined on one line)</small>	Date	Time	Matrix				Containers & Preservatives							Explosives	HAA Metals - Mercury	Perchlorate	Special Instructions/ Conditions of Receipt
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2	NaOH				
<b>EB-01</b>	<b>2-11-08</b>	<b>1530</b>	X				4							X	X	X	<b>ice</b>
<b>SW-C8</b>	<b>2-11-08</b>	<b>1633</b>	X				4							X	X	X	<b>ice</b>

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	(A fee may be assessed if samples are retained longer than 1 month)
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____	QC Requirements (Specify) <b>Send results to Janci Dawson 703-818-3054</b>
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1. Relinquished By <b>Wally O'Rear</b>	Date <b>2/12/08</b>	Time <b>1200</b>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments

# Chain of Custody Record

SEVERN  
TRENT

# STL

Severn Trent Laboratories, Inc.

4124 (0807)

Client <i>Wally O'Rear : Tech Law Inc.</i>		Project Manager <i>Wally O'Rear</i>		Date <i>2-11-08</i>	Chain of Custody Number <i>403352</i>
Address <i>1444 Oak Lawn Av</i>		Telephone Number (Area Code)/Fax Number <i>972-754-0638</i>		Lab Number	Page <i>1</i> of <i>1</i>

City <i>Dallas</i>	State <i>TX</i>	Zip Code <i>75207</i>	Site Contact <i>Wally O'Rear</i>	Lab Contact	Analysis (Attach list if more space is needed)
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Project Name and Location (State) <i>Shumaker / Arkansas</i>	Carrier/Waybill Number <i>FedEX 8619 9393 7599</i>	Special Instructions/ Conditions of Receipt
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Contract/Purchase Order/Quote No. <i>76952</i>	Matrix	Containers & Preservatives	Explosives Toxic Metals Mercury Perchlorate	Special Instructions/ Conditions of Receipt
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Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Explosives	Toxic Metals	Mercury	Perchlorate	Special Instructions/ Conditions of Receipt
			Air	Aqueous	Sed.	Sol.	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2/NaOH					
<i>SW-06</i>	<i>2-11-08</i>	<i>1720</i>		<i>X</i>			<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		<i>ice</i>
<i>SW-35</i>	<i>2-11-08</i>	<i>1740</i>		<i>X</i>			<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>		<i>ice</i>

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	(A fee may be assessed if samples are retained longer than 1 month)
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____	QC Requirements (Specify) <i>Send Results to Jana Dawson 703-818-3054</i>
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1. Relinquished By <i>Wally O'Rear</i>	Date <i>2/10/08</i>	Time <i>1200</i>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments

DISTRIBUTION: WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy

**Chain of Custody Record**

4124 (0807)

Client <i>Wally O'Neer : Tech Law Inc.</i>		Project Manager <i>Wally O'Neer</i>			Date <i>2-11-08</i>	Chain of Custody Number <i>03351</i>		
Address <i>1444 Oak Lawn Av</i>		Telephone Number (Area Code)/Fax Number <i>972-754-0638</i>			Lab Number	Page <i>1</i> of <i>1</i>		
City <i>Dallas</i>	State <i>TX</i>	Zip Code <i>75207</i>	Site Contact <i>Wally O'Neer</i>	Lab Contact	Analysis (Attach list if more space is needed)			
Project Name and Location (State) <i>Shumaker / Arkansas</i>			Carrier/Waybill Number <i>Fed EX 8619 9392 7603</i>				Special Instructions/ Conditions of Receipt	
Contract/Purchase Order/Quote No. <i>76952</i>								

Sample I.D. No. and Description <small>(Containers for each sample may be combined on one line)</small>	Date	Time	Matrix				Containers & Preservatives							Explosives	Heavy Metals	Perchlorate																
			Air	Aqueous	Sed	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc/NaOH																				
<i>SW-09</i>	<i>2-11-08</i>	<i>1540</i>	<i>X</i>				<i>4</i>		<i>1</i>						<i>X</i>	<i>X</i>	<i>X</i>															<i>ice</i>
<i>SW-07</i>	<i>2-11-08</i>	<i>1652</i>	<i>X</i>				<i>4</i>		<i>1</i>						<i>X</i>	<i>X</i>	<i>X</i>														<i>ice</i>	

Possible Hazard Identification			Sample Disposal			(A fee may be assessed if samples are retained longer than 1 month)	
<input checked="checked" type="checkbox"/> Non-Hazard	<input type="checkbox"/> Flammable	<input type="checkbox"/> Skin Irritant	<input type="checkbox"/> Poison B	<input type="checkbox"/> Unknown	<input type="checkbox"/> Return To Client	<input checked="checked" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	
Turn Around Time Required			QC Requirements (Specify)				
<input type="checkbox"/> 24 Hours	<input type="checkbox"/> 48 Hours	<input type="checkbox"/> 7 Days	<input type="checkbox"/> 14 Days	<input type="checkbox"/> 21 Days	<input type="checkbox"/> Other _____	<i>Send results to Jona Dawson 703-818-3054</i>	
1. Relinquished By <i>Wally O'Neer</i>		Date <i>2/12/08</i>	Time <i>1200</i>	1. Received By		Date	Time
2. Relinquished By		Date	Time	2. Received By		Date	Time
3. Relinquished By		Date	Time	3. Received By		Date	Time
Comments							

# Chain of Custody Record

4124 (0807)

Client <i>Wally O'Keefe Tech Law, Inc.</i>		Project Manager <i>Wally O'Keefe</i>		Date <i>2-12-08</i>	Chain of Custody Number <i>403355</i>
Address <i>1444 Oak Lawn Av</i>		Telephone Number (Area Code)/Fax Number <i>972-751-0038</i>		Lab Number	Page <i>1</i> of <i>1</i>

City <i>Dallas</i>	State <i>TX</i>	Zip Code <i>75207</i>	Site Contact <i>Wally O'Keefe</i>	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <i>Shumaker / Arkansas</i>		Carrier/Waybill Number <i>FedEx 8619 9392 7420</i>				

Contract/Purchase Order/Quote No. <i>76952</i>		Matrix		Containers & Preservatives				<i>Explosives BPA metals mercury Pesticides</i>		
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Sample I.D. No. and Description <small>(Containers for each sample may be combined on one line)</small>	Date	Time	Matrix				Containers & Preservatives													
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2	NaOH							
<i>SC-30</i>	<i>2-12-08</i>	<i>0945</i>	X				4	1						X	X	X				<i>ice</i>
<i>SC-33</i>	<i>2-12-08</i>	<i>0815</i>	X				4	1						X	X	X				<i>ice</i>
<i>SC-34</i>	<i>2-12-08</i>	<i>0915</i>	X				4	1						X	X	X				<i>ice</i>

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown				Sample Disposal <input type="checkbox"/> Return To Client <input checked="" type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months				(A fee may be assessed if samples are retained longer than 1 month)			
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input type="checkbox"/> Other _____				QC Requirements (Specify) <i>Send Results to Tina Trause 703-818-3254</i>			
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1. Relinquished By <i>Wally O'Keefe</i>	Date <i>2/13/08</i>	Time <i>1400</i>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments

**Chain of Custody Record**

4124 (0807)

<b>Client</b> Wally O'Rear, Tech Lab, Inc	<b>Project Manager</b> Wally O'Rear	<b>Date</b> 2-12-08	<b>Chain of Custody Number</b> 401354
<b>Address</b> 1444 Oak Lawn Av.	<b>Telephone Number (Area Code)/Fax Number</b> 972-754-0638	<b>Lab Number</b>	
<b>City</b> Dallas	<b>State</b> TX	<b>Zip Code</b> 75207	<b>Page</b> 1 of 1

<b>Project Name and Location (State)</b> Shumaker / Arkansas	<b>Site Contact</b> Wally O'Rear	<b>Lab Contact</b>	<b>Analysis (Attach list if more space is needed)</b>	<b>Special Instructions/Conditions of Receipt</b>
<b>Contract/Purchase Order/Quote No.</b> 76952	<b>Carrier/Waybill Number</b> FedEx 8619 8392 7290			

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives							Special				
			Air	Aqueous	Sed	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2	NaOH	Explosives	Flammables	Toxic		
SW-31	2-12-08	1035	X				4	1										Ice
SW-29	2-12-08	1100	X				4	1										Ice
SW-32	2-12-08	1012	X				4	1										Ice

**Possible Hazard Identification**  
 Non-Hazard  
 Flammable  
 Skin Irritant  
 Poison B  
 Unknown

**Sample Disposal**  
 Return To Client  
 Disposal By Lab  
 Archive For \_\_\_ Months

(A fee may be assessed if samples are retained longer than 1 month)

**Turn Around Time Required**  
 24 Hours  
 48 Hours  
 7 Days  
 14 Days  
 21 Days  
 Other: \_\_\_\_\_

**QC Requirements (Specify)**  
 Send Results to Jane Dawson 703-318-3251

<b>1. Relinquished By</b> Wally O'Rear	<b>Date</b> 2/13/08	<b>Time</b> 1400	<b>1. Received By</b>	<b>Date</b>	<b>Time</b>
<b>2. Relinquished By</b>	<b>Date</b>	<b>Time</b>	<b>2. Received By</b>	<b>Date</b>	<b>Time</b>
<b>3. Relinquished By</b>	<b>Date</b>	<b>Time</b>	<b>3. Received By</b>	<b>Date</b>	<b>Time</b>

**Comments**



# Chain of Custody Record

SEVERN  
TRENT

# STL

Severn Trent Laboratories, Inc.

4124 (0807)

Client <i>Wally O'Rear TechLaw, Inc.</i>		Project Manager <i>Wally O'Rear</i>		Date <i>2-17-08</i>	Chain of Custody Number <i>403354</i>
Address <i>1444 Oak Lawn AV</i>		Telephone Number (Area Code)/Fax Number <i>972-754-0638</i>		Lab Number	Page <i>1</i> of <i>1</i>

City <i>Dallas</i>	State <i>TX</i>	Zip Code <i>75207</i>	Site Contact <i>Wally O'Rear</i>	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <i>Shumaker / Arkansas</i>			Carrier/Waybill Number <i>TELIX 90119392 7305</i>			

Contract/Purchase Order/Quote No. *76952*

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Explosives	Acid Metals	Mercury	Ammoniate													
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc/NaOH																	
<i>SW-28</i>	<i>2-12-08</i>	<i>1120</i>	<i>X</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>														<i>ice</i>
<i>SW-36</i>	<i>2-12-08</i>	<i>1140</i>	<i>X</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>														<i>ice</i>
<i>FB-01</i>	<i>2-12-08</i>	<i>1145</i>	<i>X</i>				<i>4</i>	<i>1</i>					<i>X</i>	<i>X</i>	<i>X</i>														<i>ice</i>

Possible Hazard Identification:  Non-Hazard  Flammable  Skin Irritant  Poison B  Unknown

Sample Disposal:  Return To Client  Disposal By Lab  Archive For \_\_\_\_\_ Months (A fee may be assessed if samples are retained longer than 1 month)

Turn Around Time Required:  24 Hours  48 Hours  7 Days  14 Days  21 Days  Other \_\_\_\_\_

QC Requirements (Specify): *Send results to Jana Dawson 703-818-3254*

1. Relinquished By <i>Wally O'Rear</i>	Date <i>2/13/08</i>	Time <i>1400</i>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments

**Chain of Custody Record**

4124 (0807)

Client <b>TechLaw, Inc</b>		Project Manager <b>Wally O'Rear</b>		Date	Chain of Custody Number <b>401352</b>
Address <b>4100 Ambrosia LN</b>		Telephone Number (Area Code)/Fax Number <b>773/754-0638</b>		Lab Number	Page <b>1</b> of <b>1</b>

City <b>Plano</b>	State <b>TX</b>	Zip Code <b>75093</b>	Site Contact <b>NA</b>	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <b>Shumaker, AR</b>			Carrier/Waybill Number <b>7905 N34 5909</b>			

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives							Analysis	Special Instructions/Conditions of Receipt	
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc/NaOH	Other			
<b>IS-AJ-01</b>	<b>5/20/08</b>	<b>1318</b>	<input checked="" type="checkbox"/>													<b>2 1/2 gallons</b>

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input checked="" type="checkbox"/> Unknown	Sample Disposal <input type="checkbox"/> Return To Client <input type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	(A fee may be assessed if samples are retained longer than 1 month)
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input checked="" type="checkbox"/> Other _____	QC Requirements (Specify)
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1. Relinquished By <b>Wally O'Rear</b>	Date <b>5/27/08</b>	Time <b>1700</b>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments **send results to: Jane Dawson**  
**14500 Avion Parkway Suite 300, Chantilly, VA 20151-1101 (703) 818-3354**

# Chain of Custody Record

# TestAmerica

THE LEADER IN ENVIRONMENTAL TESTING

4124 (0907)

Temperature on Receipt \_\_\_\_\_

Drinking Water? Yes  No

Client <b>TechLaw, Inc.</b>	Project Manager <b>Wally O'Brien</b>	Date	Chain of Custody Number <b>407338</b>
Address <b>4100 Ambrosia LN</b>	Telephone Number (Area Code)/Fax Number <b>972/754-0638</b>	Lab Number	Page <b>1</b> of <b>1</b>
City <b>Plano</b>	State <b>TX</b>	Zip Code <b>75093</b>	Analysis (Attach list if more space is needed)
Project Name and Location (State) <b>Shumaker AR</b>	Site Contact <b>NA</b>	Lab Contact	
Contract/Purchase Order/Quote No	Carrier/Waybill Number <b>7989 4946 1018</b>	Special Instructions/Conditions of Receipt	

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives						Analysis (Attach list if more space is needed)	Special Instructions/Conditions of Receipt	
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2/NaOH			NaOH
<b>IS-AS-01</b>	<b>5/10/08</b>	<b>1318</b>		<b>X</b>											<b>2 1/2 gallons partial parcel partial shipment</b>

Possible Hazard Identification	Sample Disposal	(A fee may be assessed if samples are retained longer than 1 month)
<input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	<input type="checkbox"/> Return To Client <input type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	

Turn Around Time Required	QC Requirements (Specify)
<input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input checked="" type="checkbox"/> Other _____	

1. Relinquished By <b>Wally O'Brien</b>	Date <b>5/7/08</b>	Time <b>1700</b>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments: **Send results to: Jane Dawson, TechLaw, Inc. 14500 Avion Parkway, Suite 300, Charlotte, NC 20151-1101 (703) 818-3254**

DISTRIBUTION: WHITE - Returned to Client with Report; CANARY - Stays with the Sample; PINK - Field Copy

# Chain of Custody Record

4124 (0807)

Client <b>TechLaw, Inc</b>	Project Manager <b>Wally O'Pea</b>	Date <b>5/27/08</b>	Chain of Custody Number <b>101351</b>
Address <b>4100 Ambrosia LN</b>	Telephone Number (Area Code)/Fax Number <b>972/754-0638</b>	Lab Number	Page <b>1</b> of <b>1</b>

City <b>Plano</b>	State <b>TX</b>	Zip Code <b>75093</b>	Site Contact	Lab Contact	Analysis (Attach list if more space is needed)	Special Instructions/ Conditions of Receipt
Project Name and Location (State) <b>Shumaker</b>			Carrier/Waybill Number <b>7927 0594 5056</b>			

Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Date	Time	Matrix				Containers & Preservatives										Isotopic		
			Air	Aqueous	Sed.	Soil	Unpres.	H2SO4	HNO3	HCl	NaOH	ZnAc2	NaOH	KCC					
<b>IS-SW-05</b>	<b>5/19/08</b>	<b>0855</b>		X														X	X
<b>IS-SW-07</b>	<b>5/21/08</b>	<b>0954</b>		X														X	X

Possible Hazard Identification <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	Sample Disposal <input type="checkbox"/> Return To Client <input type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For _____ Months	(A fee may be assessed if samples are retained longer than 1 month)
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Turn Around Time Required <input type="checkbox"/> 24 Hours <input type="checkbox"/> 48 Hours <input type="checkbox"/> 7 Days <input type="checkbox"/> 14 Days <input type="checkbox"/> 21 Days <input checked="" type="checkbox"/> Other _____	QC Requirements (Specify)
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1. Relinquished By <b>Wally O'Pea</b>	Date <b>5/27/08</b>	Time <b>1700</b>	1. Received By	Date	Time
2. Relinquished By	Date	Time	2. Received By	Date	Time
3. Relinquished By	Date	Time	3. Received By	Date	Time

Comments: **Send results to: Jane Dawson, TechLaw, Inc. 14500 Avina Parkway, Suite 300 Clonall, VA 20151-1101 (703) 818-3254**