



Microbiology Division

Mold Chain of Custody

Sampled by
Name _____

Date Sampled _____

Address _____

Phone Number _____

Sample Number	Sample Location	Indicate Bulk or Tape

Note: If Mailing address is different from above, please fill in blanks below.

Mailing Address	_____

Send Sample to: _____
 QuanTEM Laboratories, LLC
 2033 Heritage Park Drive
 Oklahoma City, OK 73120

Contact QuanTEM at _____
 email micro@quantem.com
 Phone (405) 755-7272

FOR LAB USE ONLY

Received by QuanTEM Laboratories, LLC	
By _____	Date Received _____
Sample Condition _____	