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Lafayette, IN 47905-3964
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DEA: RT0386335

**SAMPLE SUBMISSION FORM**

|  |
| --- |
| **CLIENT INFORMATION:**  |
| Company: |  |
| Contact Name: |  |
| Mailing Address: |  |
| City, State, Zip: |  |
| Fax: |  |
| Phone: |  | Preferred Contact Method |
| Email: |  | Preferred Contact Method |
| DEA # (if applicable) |  | **Service Levels** (Please Check ONE) |
| Proposal or Quote #: |  | **FTE** **Legal: Litigation Support or Expert Testimony****Non GMP** **Priority** = 24hr service or as quoted **Express** = 48hr service or as quoted **Standard** = 3-5 business days or as quoted**GMP****Priority** = 3-5 business days or as quoted**Express** = 5-7 business days or as quoted**Standard** = 7-10 business days or as quoted*Above Services Include Full report and QA Review**Samples must be received by 12pm EST or they will be queued for testing the next business day* |
| SIGNATURE: |  |
| **BILLING AND INVOICE:**  |
| Company: |  |
| Contact Name: |  |
| Billing Address: |  Same as above |
| City, State, Zip: |  |
| Phone: |  |
| Method of Payment: | PO  CREDIT CARD (processing fee may be applicable) |
| PO# or Credit Card #: |  |
| Name on Credit Card: |  |
| Exp. Date: |  |
| Security Code: |  |
| Billing Zip Code: |  |
| AP Email Address: |  |
| **Material Name (SDS Required)** | **Sample ID or Lot #** | **Analysis (es) Requested** | **Return Sample?\*** | **Classification** | **Storage** |
|  |  |  | Yes No | NormalDEA Schedule I-VATF Regulated | AmbientRefrigeratorFreezerLight Sensitive |
|  |  |  | Yes No | NormalDEA Schedule I-VATF Regulated | AmbientRefrigeratorFreezerLight Sensitive |
|  |  |  | Yes No | NormalDEA Schedule I-VATF Regulated | AmbientRefrigeratorFreezerLight Sensitive |
|  |  |  | Yes No | NormalDEA Schedule I-VATF Regulated | AmbientRefrigeratorFreezerLight Sensitive |
|  |  |  | Yes No | NormalDEA Schedule I-VATF Regulated | AmbientRefrigeratorFreezerLight Sensitive |
| Additional Information (i.e., special sample handling/preparation instructions, specific data acquisition parameters, reporting requirements, etc.)Please provide a UPS/FedEx account number or a shipping label if sample return is requested |