**TOXICOLOGY LABORATORY**

Landcare Research

PO Box 69040

Lincoln 7640

Ph: +61 3 321 9617

**SAMPLE DETAILS FOR 1080 IN URINE**

***Analytical results for these samples will be reported to the client shown below only***

|  |
| --- |
| **Client details**  Contact name:………………………………………………………………………………………...  Organisation:………………………………………………………………………………………….  Address:………………………………………………………………………………………………  Phone:…………………………………..Fax:………………………………………………………..  Date sample sent:………………………………… |

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| --- |
| **Test requirements:**  Urgent/standard\* turnaround:………………………………………………………………………. |

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| **Sample identification** | **Date/Time taken** | **Remarks** |
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\*15 working days maximum

Please return to:

Lynn Booth

Toxicology Laboratory

Landcare Research

Gerald Street

Lincoln 7608

Fax: 03 321 9998