## WISCONSIN OCCUPATIONAL HEALTH LABORATORY (WOHL) SAMPLE SUBMISSION FORM

			WOHL COMP# Phone # FAX #					Send Results To ATTN:			
Project P.O. #			Email Address  Date Sampled				SPECIAL INSTRUCTIONS				
Turnaround:  ◆ PLEASE GRO		□ PRIC be prearrang	ged }	ORMA							
LAB USE ONLY			WIPE SAMPLES FOR AIR SAMP				IPLES (	ES ONLY			
WOHL SAMPLE #	CUSTOMER FIELD#	SAMPLE MEDIA	SIZE OF AREA WIPED EX: 2 IN x 2 IN	TIME ON	TIME OFF	TOTAL TIME (MINS)	FLOW RATE (L/MIN)	VOLUME (LITERS)	ANAL	NALYSIS REQUEST	
UPS, Fed-Ex &	TODY: Relinquished	US Postal So		Pho		224-6210		g Questions		Date SAMPLE CONDITION	
Wisconsin Occupational Health Lab 2601 Agriculture Drive Madison, WI 53718		PO Box 7996 <u>FAX</u> 608 224-6213 <u>V</u>					Web Pa	WOHLsampling@mail.slh.wisc.edu  Web Page/Order Media http://www.slh.wisc.edu/wohl  NOT OK See Sample Receipt Record			