



Ag Lab:
119 E. Main St
Othello, WA 99344
T: (509) 488-0112

Environmental Lab:
1320 E. Spokane St,
Suite C
Pasco, WA 99301
T: (509) 547-3838

Oregon Office:
1300 6th St,
Suite J
Umatilla, OR 97882
T: (541) 922-6435

Matrix Sciences International
Billing/Invoice Questions:
1061 Feehanville Drive
Mt. Prospect, IL 60056
T: (847) 272-8700

Client Name: Laboratory Performing Analysis: Kuo Testing Labs, Inc.

Client Information	Billing Address	Reporting Address (if different from Billing Address)	Results
Contact Person:	Company:	Company:	<input type="checkbox"/> E-mail <input type="checkbox"/> FAX <input type="checkbox"/> Mail
Telephone No.:	Address:	Address:	
Email:	City, St., ZIP:	E-mail:	
Project Name:	Purchase Order Number:	Cell Phone:	
Sampling Location:	Telephone:	Telephone:	

KTL Lab Sample ID	Customer Sample Identification	Date/Time Collected	Sample Type: Potable Water Non-Potable	# of containers	Analyses Required								Requested Turn-around: <input type="checkbox"/> Normal <input type="checkbox"/> Rush Comments for the lab:

Sampled By (PRINT):	Sampled By (SIGNATURE)	Date/Time	Received By (PRINT):	Received By (SIGNATURE):	Date/Time
Relinquished By (PRINT):	Relinquished By (SIGNATURE)	Date/Time	Received By (PRINT):	Received By (SIGNATURE):	Date/Time
Relinquished By (PRINT):	Relinquished By (SIGNATURE)	Date/Time	Received By (PRINT):	Received By (SIGNATURE):	Date/Time

FOR LABORATORY USE ONLY

Sample Temp: _____ °C

MCL Exceedance/Positive Bacteria Contact

Date/Time

Sample Receipt/Preservation Form

Samples Received Intact? Yes No N/A

Samples Received From: UPS FedEx USPS Client Walk-in Courier Other: _____

COC Present/Complete? Yes No N/A

Custody Seal on Cooler/Box: Yes No N/A

Additional Comments: _____

Labels and COC's agree? Yes No N/A

Custody Seals Intact: Yes No N/A

Samples Received within holding time? Yes No N/A

Samples Properly Preserved? Yes No N/A

Correct Containers Received? Yes No N/A

Preservation Used: HNO3 H2SO4

-Kuo bottles used? Yes No N/A

Number of bottles received? _____

Number of Coolers/Boxes: _____ Cooler Temp: _____ Thermometer Used: _____

Date/Time Received: _____

Received by (signature): _____

Drop-Off Locations

Adams County

Location	Pickup Day/Time
Kuo Testing Labs 119 E. Main St. Othello, WA	Sunday: 3:30pm Mon - Thu: 8am to 2:30pm

Grant County

Location	Pickup Day/Time
Grant County Health Dept 1038 W. Ivy Ave. #1 Moses Lake, WA	Mon - Thu: 12pm
Lindsay Water 1229 Basin St. SW Ephrata, WA	Tuesday ONLY: 11:30AM

Franklin County

Location	Pickup Day/Time
Kuo Testing Labs 1320 E. Spokane St. Suite C Pasco, Wa	Sunday: 3:30pm Mon - Thu: 8am to 4pm
Simplot Grower Solutions 100 1st Ave. Mesa, Wa	Sunday: 3:30pm Mon - Thu: 8am to 4pm

Umatilla County (OR)

Location	Pickup Day/Time
Kuo Testing Labs 1300 6th St. Suite J Umatilla, OR	Sunday: 2:00 pm Mon - Thu: 4:00 pm



A Matrix Sciences Company

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Additional drop off locations in Eltopia, Moxee, Sunnyside, and Yakima. Please call in advance for courier service and availability.

**You will receive invoicing after samples have been processed - contact any of our offices to make a payment. We accept Visa, MasterCard, & American Express.
Please make checks or money orders payable to Matrix Sciences (follow invoice instructions).
Cash is NOT accepted**