

Rush

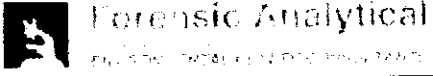
Smoke Impact Assessment Analysis Request Form (COC)

Name & Address: Forensic Analytical Consulting Services, Inc. (LA05) 2959 Pacific Commerce Drive Rancho Dominguez, CA 90221		PO/Job#: PJ 39948	Date: 12-5-2018
Contact: Michelle Rosales		Turn Around Time: Rush	
Phone: (310)668-5600 Fax: (310)763-8684		<input checked="" type="checkbox"/> Same Day / <input type="checkbox"/> 1 Day / <input type="checkbox"/> 3 Day / <input checked="" type="checkbox"/> 5 Day	
E-mail: mrosales@forensicanalytical.com		Analysis Type:	
Site: PJ 39948		<input type="checkbox"/> IAQ Particle Identification (PLM LAB) <input type="checkbox"/> PLM Opaques/Soot	
		<input type="checkbox"/> Particle Identification (TEM LAB) <input type="checkbox"/> Special Project	
		<input type="checkbox"/> Limited Particle Identification with pH	
		<input checked="" type="checkbox"/> Limited Particle Identification	
		<input type="checkbox"/> Carbonaceous and dark opaque particles and/or ash components.	
Comments:		Hold Samples: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Report Via: <input type="checkbox"/> Fax <input checked="" type="checkbox"/> E-mail

Sample ID	Sample Location / Description	Sample Type
T01	Class Room 1 / window sill	
T02	Cottage A / window sill	
T03	Cottage B / Content adj to window	
T04	Class Room 2 / Door Threshold	
T05	Class Room 4 / Door Threshold	
T06	Staff Lounge / Door Threshold	
T07	Room 8 / Window sill	
T08	Room 9 / Content adj to window	
T09	Room 10 / Interior Content	
T010	Room 11 / Content	
T11	Library / Content	
T12	Room 20 / window sill	
T13	Room 23 / Content adj to window	
T14	Room 14 / window sill	
T15	Room 16 / window sill	

Sample Type: T = Taps, MV = Microvac, S = Swab, B = Bulk

Sampled By: Edward G & Chris K. Date: 12-05-2018		Time: Various	
Shipped Via: <input type="checkbox"/> Fed Ex <input type="checkbox"/> DHL <input type="checkbox"/> UPS <input type="checkbox"/> US Mail <input type="checkbox"/> Courier <input checked="" type="checkbox"/> Drop Off <input type="checkbox"/> Other:			
Relinquished By: Edward G.		Relinquished By:	
Date / Time: 12-6-2018 @ 8:50am		Date / Time:	
Received By: [Signature] D/O		Received By:	
Date / Time: 12-06-18 12:13p		Date / Time:	
Condition Acceptable? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Condition Acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No	



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Smoke Impact Assessment Analysis Request Form (COC)

Name & Address: Forensic Analytical Consulting Services, Inc. (LA05) 2959 Pacific Commerce Drive Rancho Dominguez, CA 90221		PO/Job#: PJ 39948	Date: 2/5/2018
Contact: Michelle Rosales		Turn Around Time: Rush	
Phone: (310)668-5600 Fax: (310)763-8684		<input checked="" type="checkbox"/> Same Day / <input type="checkbox"/> 1 Day / <input type="checkbox"/> 3 Day / <input checked="" type="checkbox"/> 5 Day	
E-mail: mrosales@forensicanalytical.com		Analysis Type:	
Site: PJ 39948		<input type="checkbox"/> IAQ Particle Identification (PLM LAB) <input type="checkbox"/> PLM Opaques/Soot	
		<input type="checkbox"/> Particle Identification (TEM LAB) <input type="checkbox"/> Special Project	
		<input type="checkbox"/> Limited Particle Identification with pH	
		<input checked="" type="checkbox"/> Limited Particle Identification	
		<input type="checkbox"/> Carbonaceous and dark opaque particles and/or ash components.	
Comments:		Hold Samples: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Report Via: <input type="checkbox"/> Fax <input checked="" type="checkbox"/> E-mail

Sample ID	Sample Location / Description	Sample Type
T16	Computer Lab RM 19 / Window sill	
T17	RM 35 / Window sill	
T18	MPR / Wall adj to Entry	
T19	MPR / Content Int	
T20	Cafeteria Service Room / Wall adj Entry	

Sample Type: T = Tape, MV = Microvac, S = Swab, B = Bulk

Sampled By: Edward G & Chris K. Date: 12-05-2018 Time: Various	
Shipped Via: <input type="checkbox"/> Fed Ex <input type="checkbox"/> DHL <input type="checkbox"/> UPS <input type="checkbox"/> US Mail <input type="checkbox"/> Courier <input checked="" type="checkbox"/> Drop Off <input type="checkbox"/> Other:	
Relinquished By: Edward G	Relinquished By:
Date / Time: 12-06-2018 8:50am	Date / Time:
Received By: [Signature]	Received By:
Date / Time: 12-06-18 12:13p	Date / Time:
Condition Acceptable? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Condition Acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No