OZARK UNDERGROUND LABORATORY, INC.

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SAMPLE COLLECTION DATA SHEET for FLUORESCENCE ANALYSIS

Project:_____**Week No:**_____ **Samples Collected By:**_____

Samples Shipped By:_____**Samples Received By:**_____

Date Samples Shipped:____/____/___ **Date Samples Received:**____/____/___ **Time Samples Received:**_____:_____ **Return Cooler? Yes**_____**No**_____

Bill to:_____**Send Results to:**_____

Analyze for: Fluorescein____**Eosine**_____**Rhodamine WT**_____**Other**_____**Ship cooler to:**_____

OUL use only		***Please indicate stations where dye was visible in the field*** *for field technician use - use black ink only*						*OUL use only*
# CHAR REC'D	LAB NUMBER	STATION NUMBER 1-4 Numbers	STATION NAME	PLACED		COLLECTED		# WATER REC'D
				DATE	TIME	DATE	TIME	

COMMENTS:_____

_____

This sheet filled out by OUL staff? Yes_____**No**_____**Charts for samples on this page proofed by OUL:**_____