

**EFS SAMPLE SUBMISSION FORM**Project Code Project Name Number of Samples Sample Type sent Test to be carried out Purchase Order No (Mandatory) Signature Date Sent Name and Address of Sender  
Including Fax/Email address and phone numbers.**N.B. Certificate of analysis for test results will be sent by fax or email (as indicated above).**

Sample(s) and submission form to be sent to: TSE Laboratory, Eurofins Forensic Services, Faraday Street, Birchwood Park, Risley, WA3 6FW, United Kingdom.

Tel.: 0844 057 0110

**FOR COMPLETION AT TESTING LABORATORY**Date Received Tested On Date Fax/Email Sent Signature Date

Sample ID		Sample ID	
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