



ANALYTICAL LAB REQUEST FORM

9495 Candida Street - San Diego, CA 92126

DATE: _____

ORDER INFORMATION

CUSTOMER INFORMATION

EXISTING CUSTOMER? YES NO

COMPANY: _____

CONTACT NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE _____

SALES ORDER # (if pre-ordered) _____

PO #: _____

Billing Preference:

check credit card: (last 4 digits) _____

wire transfer

net terms (only available for pre-approved customers)

Other Notes for the Lab: _____

| SAMPLE # | PART NUMBER Ex. LS6610 | TEST NAME Ex. Complete Microbiological Analysis | SAMPLE NAME OR DESCRIPTION |
|----------|---------------------------|--|----------------------------|
| 1 | | | |
| 2 | | | |
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Analytical services are conducted at our San Diego Lab. Please ship samples to the address below, or drop off between the hours of 9 am and 4 pm PST, Monday-Friday.

Shipping Address:

White Labs

Attn: Analytical Lab
9557 Candida St.
San Diego, CA 92126

Drop off location

White Labs Asheville

172 South Charlotte St.
Asheville, NC 28801

Drop off location

White Labs San Diego

9495 Candida St.
San Diego, CA 92126