



# ANALYTICAL LAB REQUEST FORM

9495 Candida Street - San Diego, CA 92126

DATE: \_\_\_\_\_

## ORDER INFORMATION

## CUSTOMER INFORMATION

SALES ORDER # (if pre-ordered) \_\_\_\_\_

EXISTING CUSTOMER?  YES  NO

PO #: \_\_\_\_\_

COMPANY: \_\_\_\_\_

Billing Preference:

CONTACT NAME: \_\_\_\_\_

check  credit card: (last 4 digits) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

wire transfer

\_\_\_\_\_

net terms (only available for pre-approved customers)

EMAIL: \_\_\_\_\_

Other Notes for the Lab: \_\_\_\_\_

PHONE \_\_\_\_\_

\_\_\_\_\_

SAMPLE #	PART NUMBER Ex. LS6610	TEST NAME Ex. Complete Microbiological Analysis	SAMPLE NAME OR DESCRIPTION
1			
2			
3			
4			
5			
6			
7			

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  
9537 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