

PathCon[®] Laboratories

270 Scientific Drive, Suite 3
Norcross, GA 30092

Phone: 770-446-0540
Fax: 770-446-0610

PathCon Number: _____ Date: _____

Investigator: _____ Telephone _____

Company/Agency: _____ Fax _____

Address for Report: _____

City _____ State _____ Zip _____

Address for Invoice: _____

City _____ State _____ Zip _____ Purchase Order or Reference No. _____

Sample Identification Record

For client signature:

Released by: _____

Date: _____ Time: _____

For PathCon signature:

Received by: _____

Date: _____ Time: _____

Site # _____ Description: _____

Sample Type: () Bulk/Swab () Water/Liquid

Analyze for: () Fungi () Environmental Bacteria () *Legionella* Bacteria () Other _____

Site # _____ Description: _____

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