



Hawaii State Department of Health
State Laboratories Division, Chemistry
Chemical Terrorism Response Laboratory
2725 Waimano Home Road Pearl City, Hawaii 96782
Phone: (808) 453-6677 Fax: (808) 453-6662

Chain of Custody Form Instructions

- Fill in first block upon receipt of sample(s).
- Fill in additional blocks as sample(s) is moved to different storage locations and/or transferred to other individuals.
- If sample(s) is transferred to another individual include original Chain of Custody form(s) with sample(s). Make copies for your records if necessary.
- All fields in each block must be filled in.
- Instructions for individual fields:
 1. Collected/Received by: Name and signature of individual collecting/receiving sample(s). Date and time samples were acquired.
 2. Sample ID: Physical description of sample(s): matrix, quantity, etc. Sample identification number if applicable.
 3. Purpose: Purpose sample(s) were collected/received. What testing will be performed on them if applicable.
 4. Condition/Packaging: Condition of sample(s) and sample packaging upon collection/receipt. Note if sample(s) or packaging is already opened or appear compromised in any manner.
 5. Temperature/Location: Temperature of sample(s) upon receipt. Location and temperature where sample(s) will be stored.