

**Illinois Department of Public Health
Division of Laboratories**

**ENVIRONMENTAL SAMPLE
COVER SHEET**

Use for Food, Miscellaneous Environmental Batch Samples

COLLECTION

COLLECTION SITE _____	INCIDENT/COMPLAINT/OUTBREAK # _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
SANITARIAN/COLLECTOR _____	EMAIL OF COLLECTOR _____
LOCAL HEALTH DEPT _____	SIGNATURE _____

SAMPLES SUBMITTED

SAMPLE NUMBER	COLLECTION DATE	STATE CASE ID NUMBER	LAB ID NUMBER (lab use only)	DESCRIPTION OF SAMPLE OR UNIQUE IDENTIFIER
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

Springfield Laboratory
IL Department of Public Health
Division of Laboratories
825 N. Rutledge Street
Springfield, IL 62702
Phone: 217-782-6562

Chicago Laboratory
IL Department of Public Health
Division of Laboratories
2121 W. Taylor Street
Chicago, IL 60612
Phone: 312-793-4760

Carbondale Laboratory
IL Department of Public Health
Division of Laboratories
1155 South Oakland Avenue
Carbondale, IL 62901
Phone: 618-457-5131

*Note: Food samples MUST be submitted to the Springfield Laboratory

COMPLETE REVERSE SIDE

**Illinois Department of Public Health
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CHAIN OF CUSTODY

INCIDENT/ COMPLAINT NUMBER/OUTBREAK # _____
CHAIN OF CUSTODY

Relinquished by (print) _____ Sign _____ Time _____ Date _____

Received by(print) _____ Sign _____ Time _____ Date _____

Relinquished by (print) _____ Sign _____ Time _____ Date _____

Received by(print) _____ Sign _____ Time _____ Date _____

Relinquished by (print) _____ Sign _____ Time _____ Date _____

Received by(print) _____ Sign _____ Time _____ Date _____

Relinquished by (print) _____ Sign _____ Time _____ Date _____

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