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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Visit #** | **Subject ID #** | **Specimen Type** | **Specimen ID #** | **Date Collected** | **Date Shipped** | **Tracking #** | **Transported by: Signature/Date** | **Receiving Lab** | **Receiving Lab Personnel Signature** | **Date Received** | **Comments** |
|  |  | Blood  Urine  Stool |  |  |  |  |  |  |  |  |  |
|  |  | Blood  Urine  Stool |  |  |  |  |  |  |  |  |  |
|  |  | Blood  Urine  Stool |  |  |  |  |  |  |  |  |  |
|  |  | Blood  Urine  Stool |  |  |  |  |  |  |  |  |  |
|  |  | Blood  Urine  Stool |  |  |  |  |  |  |  |  |  |
|  |  | Blood  Urine  Stool |  |  |  |  |  |  |  |  |  |