

BULK LAB: Internal Quality Control

- Duplicate
- Replicate

QA Officer: _____

ORIGINAL ANALYSIS

Date: _____

RE-ANALYSIS

Analyst:		Date:		Analyst:		Date:	
Asbestos %	Non Asbestos %	Lab Number	Sample Number	Asbestos %	Non Asbestos %		
		Comments:					
Asbestos %	Non Asbestos %	Lab Number	Sample Number	Asbestos %	Non Asbestos %		
		Comments:					
Asbestos %	Non Asbestos %	Lab Number	Sample Number	Asbestos %	Non Asbestos %		
		Comments:					
Asbestos %	Non Asbestos %	Lab Number	Sample Number	Asbestos %	Non Asbestos %		
		Comments:					
Asbestos %	Non Asbestos %	Lab Number	Sample Number	Asbestos %	Non Asbestos %		
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