



WQL - Client Fact Sheet

Date: _____

Client Name	
Address/Rm# building	
Phone	
Client E-mail	
Advisor's name / or Organization	
Advisor E-mail	
Department Name	
RIMS account number	
Project name or description of samples	
Analysis requested	
Number of samples	
Expected Concentration ranges	
Project start date/ End date	
Laboratory Report # (lab use)	
Notes	

*Please fill out above form. Save file with your name (example:KarolConfer_WQL_Factsheet._080718.doc).
Email attached client fact sheet back to WQL at L-WQL-EESL@lists.psu.edu.
Thank you!

Water Quality Laboratory