



## STEP 1: TO BE COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

A. Employer Name, Address and I.D. No.

Probation Officer - 1  
 15175 Innovation Dr  
 San Diego, CA 92128

C. Donor SSN or Employee I.D. No. 32154

D. Reason for Test: ☐ Pre-Employment ☐ Random ☒ Reasonable Suspicion/Cause ☐ Post Accident ☐ Periodic ☐ Other \_\_\_\_\_

E. Collection Site Address:

LJ Trucking Corp  
 12151 Innovation Drive  
 San Diego, CA 92105 Phone: 858-643-5555

F. Donor Identification Verified By: ☒ Photo I.D. ☐ Employer Representative

## STEP 2: TO BE COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100°F? ☒ Yes ☐ No (Enter Remarks)

Specimen Collection:

☒ Single ☐ Split ☐ None Provided (Enter Remarks)☒ Observed (Enter Remarks)

REMARKS:

STEP 3: TO BE COMPLETED BY COLLECTOR AND DONOR  
STEP 4: TO BE COMPLETED BY COLLECTOR AND DONOR

- Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s).

REQUESTOR: souk  
SEX: Female

11 PANEL

(11) 11 Panel



SSN/ID:



Donor's Name



I authorize the collection of this specimen for the purpose of a drug screen. I acknowledge that the specimen container(s) was/were sealed with tamper-proof seal(s) in my presence; and that the information provided on this form and on the label(s) affixed to the specimen container(s) is correct. I authorize the laboratory to release the results of the test to the company identified on this form or its designated agents.

Adair, Annette

X

SIGNATURE OF DONOR

10/16/23

DATE (MM/DD/YY)

## STEP 5: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified on this form was collected, labeled, sealed, and release to the Delivery Service noted, in accordance with applicable requirements.

souk souk

COLLECTOR'S NAME (FIRST, MI, LAST)

X

SIGNATURE OF COLLECTOR

12:10

COLLECTION TIME

10/16/23

DATE (MM/DD/YY)

RECEIVED AT LAB:

X

Signature of Accessioner

Accessioner's Name (First, MI, Last)

DATE (MM/DD/YY)

Primary Specimen  
Bottle Seal Intact☐ Yes☐ No, Enter Remark Below

REMARKS: \_\_\_\_\_

SPECIMEN BOTTLE(S) RELEASED TO:



A

DATE  
Adair, Annette

DONOR'S INITIALS



B

DATE  
Adair, Annette

DONOR'S INITIALS

SPLIT