



SOS Details

SUMMARY OF SERVICE <i>Strictly Confidential</i>			First Franchisee		T: 1177665656
					Address: dasfd, 1211, Ddcs, NSW/ACT, Australia
					ABN: 45456633123
					Email: luck@gmail.com
Client Code: 201-01-0002		Requesting Client: Arina			Date: 25/06/2019
Site Location: MGddv					
Alcohol, Oral Fluid AS 4760:2006, Urine AS/NZA 4308:2001					
Service Commenced: 0 : 12			Service Concluded: 23 : 59		
#	Donor Name	Result*	Drug	Alcohol**	Lab
1	Vdfdgd	U	Ice (Methamphetamine) Marijuana	P, Reading One:6 P, Reading Two:7	Y
2	Weee	U	Heroin Cocaine	N, Reading One:N/A N, Reading Two:N/A	Y
3	Vfghf	U	N/A	P, Reading One:5	Y

			P, Reading Two:2	
* U = Positive, result requiring further testing ** P = Positive N = Negative	Urine	Oral	Total No Alcohol Screen	13
Total Donor Screenings/Collections	12	14	Negative Alcohol	4
Negative Results	4	5	Positive Alcohol	7
Results Requiring Further Testing	4	6	Refusals, No Shows or Other	2
Device Name: sdfsd	Extra Used: fgdgd		Breath Testing Unit: ewrwe	
<p>I've conducted the alcohol and/or drug screening/collection service detailed above and confirm that all procedures were undertaken in accordance with the relevant Standard. Collector Signature:</p> 				
Comments or Observation:				
Nominated Client Representative: dsfsd		Signature: 	Time: 15 : 7	