



















SAMPLE SUBMISSION FORM

Personal Information		For Laboratory Use Only
Name:		Date Received:
Organization:		Project No:
Street Address:		Notebook No:
		Date Archived:
City:		Date Returned:
	Postal Code:	Special Instructions
Phone:		
Billing Information (If different		
Name:		Preferred Analytical Technique
Organization:		NAAXRFICP-MS
Street Address:		Other (Please describe):
City:		
	Postal Code:	Specimen Quantities and ANIDs
		Pottery:
Items to Include with Samples Map(s) indicating site locations		Clay:
Bibliographic references relevant to your project		Chert:
 Disk containing digital sample inventory in MS Excel compatible format Paper copy of the above spreadsheet Cover letter describing your project and the samples that are being sent 		Obsidian:
		Other:
		Please ensure that ANIDs are clearly written on the bag containing each specimen
Additional Information or Ins	tructions	
		Disposition of Surplus Specimens:
		Archive at MURR
		Return to Sender
		Surplus foreign and USDA-restricted soils will be autoclaved unless transferred to a USDA-approved facility
Data-Management Policy Investigators submitting projects under our	· NSF-subsidy program are expected to sign below. Stan	dard-rate customers are encouraged to do so.
I have read and understand the Arc and data-sharing policy, and I agre	haeometry Laboratory's data-management e to these conditions.	

Please return this form and the above attachments with your samples to:

Dr. Michael D. Glascock • Archaeometry Laboratory
University of Missouri Research Reactor
1513 Research Park Drive • Columbia, MO 65211, USA