



Pest Management
Solutions for Specialty
Crops and Minor Uses

TEST SUBSTANCE CHAIN OF CUSTODY FORM

TRANSFER INVENTORY: List test substance(s) here, including the name on the container label, number of containers, the batch/lot number, and trial ID numbers for which test substance was used.

TRANSFERRED BY: _____
Print name

Signature Date

Address

COURIER: _____

TRANSFERRED TO: _____

RECEIVED BY: _____
Print name

Signature Date

PLEASE RETURN THE ORIGINAL TRANSFER FORM TO THE SENDER, AND
KEEP A COPY FOR YOUR RECORDS.