## SGS – Geochemistry

Sample Submittal Form

For Lab Use	Work Order No:	Date Received:



## SGS LAB LOCATION:

Submitted by:  Company Name:  Telephone:  Email:  Courier/ Waybill:  Country of sample origin:  REPORTING INSTRUCTIONS  Report to:  Company Name:  Telephone:  Address:  City:  Province/State:  Country:  Postal/Zip Code:  Email 1:  PDF XLS CSV  Email 2:  PDF XLS CSV  Email 4:  PDF XLS CSV  Final report and invoice will be sent by PDF email.	SUBMISSION DETAILS			
Name: Telephone: Email:  Courier/ Waybill:  Country of sample origin:  REPORTING INSTRUCTIONS  Report to:  Company Name:  Telephone:  Address:  City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Submitted by:			
Email:  Courier/ Waybill: Country of sample origin:  REPORTING INSTRUCTIONS  Report to:  Company Name:  Telephone:  Address:  City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	. ,			
Courier/ Waybill:  Country of sample origin:  REPORTING INSTRUCTIONS  Report to:  Company Name:  Telephone:  Address:  City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Telephone:			
Waybill:  Country of sample origin:  REPORTING INSTRUCTIONS  Report to:  Company Name:  Telephone:  Address:  City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Email:			
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Report to:  Company Name:  Telephone:  Address:  City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Country of sample origin:			
Company Name: Telephone: Address:  City: Province/State: Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	REPORTING INSTRUCTIONS			
Telephone:  Address:  City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Report to:			
Address:  City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Company Name:			
City: Province/State:  Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Telephone:			
Country: Postal/Zip Code:  Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	Address:			
Email 1: PDF XLS CSV  Email 2: PDF XLS CSV  Email 3: PDF XLS CSV  Email 4: PDF XLS CSV  Final report and invoice will be sent by PDF email.	City:	Province/S	State:	
Email 2: PDF XLS CSV Email 3: PDF XLS CSV Email 4: PDF XLS CSV Final report and invoice will be sent by PDF email.	Country:	Postal/Zip	Code:	
Email 3: PDF XLS CSV Email 4: PDF XLS CSV Final report and invoice will be sent by PDF email.	Email 1:	PDF	XLS	CSV
Email 4: PDF XLS CSV Final report and invoice will be sent by PDF email.	Email 2:	PDF	XLS	CSV
Final report and invoice will be sent by PDF email.	Email 3:	PDF	XLS	CSV
•	Email 4:	PDF	XLS	CSV
For SGS Terms and Conditions see https://www.sgs.com/en/terms-and-conditions	For SGS Terms and Conditions	see		

## ATTENTION TO:

INVOICING DETAILS		
PO No.:	SGS Quote:	
Invoice to:	Same as Report	
Company Name:		
Telephone:		
Address:		
City:	Province/State:	
Country:	Postal/Zip Code:	
Email 1:		
Email 2:		
SAMPLE FATE		
Unless otherwise indicated, s	torage will be charged.	
	storage will be charged.	
Unless otherwise indicated, s		
Unless otherwise indicated, s Rejects	Pulps	
Unless otherwise indicated, s Rejects Return after 30 days	Pulps Return after 90 days	
Unless otherwise indicated, s Rejects Return after 30 days Dispose after 30 days Paid storage	Pulps  Return after 90 days  Dispose after 90 days  Paid storage after	
Unless otherwise indicated, s Rejects Return after 30 days Dispose after 30 days Paid storage after 30 days	Pulps  Return after 90 days  Dispose after 90 days  Paid storage after	
Unless otherwise indicated, s Rejects Return after 30 days Dispose after 30 days Paid storage after 30 days Return Attention to: Return	Pulps  Return after 90 days  Dispose after 90 days  Paid storage after	

Project Name:				Standard TAT	Rush TAT
Sample Type:	Core	Rocks	Sediments	Pulp	Soil
	Concentrates	Metal	Others:		
Analysis Type: Exploration grade		ade Ore grad	le Ore grade Control grade		Umpire grade
Special Instructions	:				
		_			
IMPORTANT: If sa	nples are known to	o contain hazardou	s material please label a	ccordingly A	sbestos NORM
		SAMPLE PREPARA Preparation	SAMPLE PREPARATION AND ASSAYS REQUES Preparation Analysis (SGS Analyt		Key Elements nents) of Interest
		<u> </u>			
Total number of		See attached	Excel file	See	attached Excel file