

Requisition
NG Nordic DK Laboratory analysis

Customer*	Contact Person*
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Contact Person*(NG Nordic)

Sample Labelling*	
Sample Type	
CLP-labelling*	
Sampling Date	
Sampling Location	

Comments/Analysis

Shipment:

If you need appropriate sample containers, please contact us by mail labservice.denmark@ngnordic.com

Label the package: Att. lab

To be filled by NG Nordic DK Laboratory		
Sample no	Received date	Initials

**Must be filled*