



Sample Field Log

Version 1.0 (April 2023)

OMMA Business Name:	Laboratory Name:	Transporter Name:
OMMA License Number:	OMMA License Number:	Transporter Agent License #:
Facility Address:	Facility Address:	OMMA License Number:
		Facility Address:
Samplers Name:	Sampling Standard Operating Procedures	Requested Analyses:
Samplers Title:	Title:	
Sampling Start Date/Time:		
Sampling End Date/Time:	Version:	
Batch Number For Which Sample Was Obtained:	Primary Sample	Reserve Sample
Total Batch Size: <small>(weight or unit count)</small>	Unique Sample ID:	Unique Sample ID:
Sample Matrix:	Total Wt or Unit Ct:	Total Wt or Unit Ct:
Sampling Conditions:		Temperature: _____
Were any problems encountered during the sampling process? YES NO		
If Yes, describe problems encountered and corrective actions taken, if any.		
Other Sampling Observations (include major inconsistencies in color, size or smell):		