** Please include sample ID sheets when requesting analyses. Thank you! **

### CLIENT INFORMATION:
- **NAME:**
- **PHONE #**
- **E-MAIL ADDRESS:**

### APPROVED BY:
- **NAME:**
- **SIGNATURE:**

By signing this requisition, I certify that the purchases shown comply with UM and Maryland state purchasing guidelines and regulations, and meet the requirements of the grant(s) listed below.

Account to Charge: __________________________

### HPL BUSINESS OFFICE USE ONLY:
- **H #:**

For questions regarding requested analyses:
- **NAME:**
- **EMAIL:**

### ANALYSES INFORMATION:

<table>
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<th>Analysis</th>
<th>Grant #</th>
<th>Sample Quantity</th>
<th>Unit Cost</th>
<th>Total</th>
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TOTAL COST: \$

Special Remarks (regarding samples, collection notes, etc):

__________________________________________________________________________________
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