



Release of Results to Accreditation Agency

Test Number:

Please select your laboratories accreditation:

ASCLD/LAB Legacy Certificate Number:

ASCLD/LAB – *International* Certificate Number:

FQS – International Certificate Number:

Laboratory Name:
Address Line 1
Address Line 2
City
State
Zip

Signature and Title

Date

Please print and sign if you would like the results of this test released to an accreditation body. Only the results associated with the test number specified on this form will be released. Scanned completed forms can be uploaded on the Forensic Assurance on-line answer sheet or emailed to