CONVERSATION RECORD

TIME: 10:00 Am

DATE: 8-1-88

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☐ VISIT ☐ CONFERENCE ☒ TELEPHONE

☒ INCOMING
☐ OUTGOING

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU	ORGANIZATION (Office, dept., bureau, etc.)	TELEPHONE NO:
Dave Speigel?	MRD Lab	

ROUTING

NAME/SYMBOL	INT

SUBJECT

L. Ontario Ordnance Works RI/FS

SUMMARY

Noted that additional laboratory samples had been received. The Chain of Custody forms labelled the samples Duplicate I & Rinsate I; while the bottle labels said Duplicate II and Rinsate II. Dave assumed the bottles were correct since this was the second set of samples received.

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION	SIGNATURE	DATE
Lee Fuerst	Lee Fuerst	8-1-88

ACTION TAKEN

\TURE	TITLE	DATE