## INDEPENDENT ASSURANCE SAMPLING AND TESTING SUMMARY LOG

							(Print full Name of Tester)					
						(Fillit full Natile Of Tester)						
DATE	WITNESS OF TEST PROCEDURE (IndicateTest Number)	WITNESS OF MATERIALS SAMPLING (Indicate Test Number)	DID THE TESTER SUCCESSFULLY PASS THE WITNESS TEST?		WAS EQUIPMENT IN GOOD WORKING CONDITION?		DID EQUIPMENT HAVE A CURRENT CALIBRATION STICKER?		CORROBORATION COMPARISON (Check One)			COMMENTS OR FOLLOW-UP ACTION
			YES	□ NO	YES	☐ NO	YES	□ NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	□ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□ NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□ NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□ NO	GOOD	FAIR	POOR	
			✓ YES	□ NO	YES	□ NO	YES	□ NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□ NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	□ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	□ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	☐ YES	□NO	GOOD	FAIR	DOOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	☐ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	□ NO	YES	□NO	GOOD	FAIR	POOR	
			YES	□ NO	YES	□ NO	YES	□ NO	GOOD	FAIR	POOR	