

CERTIFICATE OF CORRECTION

UIC: _____

Date: _____

Base Area Code: _____

MEMORANDUM FOR: Walter Reed Army Medical Center, Forensic
Toxicology Drug Testing Laboratory, Bldg 2490, Wilson Road, Fort Meade,
MD 20755-5235

SUBJECT: Certification of Correction

1. This letter is to certify the following corrections were made as indicated
below for urine specimen enclosed with this shipment for testing.

2. REFERENCE: () BOTTLE LABEL () DD FORM 2624 () Other

DOCUMENT/BATCH ___ DATE SPECIMEN COLLECTED _____

AS READS: _____

CORRECTED TO READ: _____

SIGNATURE: _____

TITLE: _____

DATE: _____

VERIFIED BY: _____

TITLE: _____

DATE: _____