**CODE:**  "R" = Retest of QC Sample  
"V" = Verification Sample  
"QA" = Comparison Sample

**Distribution:**  
1. Original to Resident Engineer  
2. FAX Copy to QC Lab  
3. QC Lab To Forward Copy To NCDOT Roadway Technician

**NOTE:** BY PROVIDING THIS DATA UNDER MY SIGNATURE AND/OR HiCAMS CERTIFICATION NUMBER, I ATTEST TO THE ACCURACY AND VALIDITY OF THE DATA CONTAINED ON THIS FORM AND CERTIFY THAT NO DELIBERATE MISREPRESENTATION OF TEST RESULTS, IN ANY MANNER, HAS OCCURRED.

**PRINT CERTIFIED QA ROADWAY TECHNICIAN’S NAME w/HiCAMS #**

**CERTIFIED QA ROADWAY TECHNICIAN’S SIGNATURE**

**PRINT CERTIFIED QA LAB TECHNICIAN’S NAME w/HiCAMS #**

**CERTIFIED QA LAB TECHNICIAN’S SIGNATURE**