# Equipment Cleaning Log
# Regional Operation Centers

| Equipment | Unique ID | Date | Time (24 hr) | Location (Lab / Field) | Liquinox Wash (Y/N) | Luminox Wash (Y/N) | Tap Water Rinse (Y/N) | 10% HCl Rinse (Y/N) | DI Water Rinse X3 (Y/N) | Other (Describe) | Sampler Name |
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*Form effective April 1, 2015*

*(Add codes for commonly used equipment types here)*