

**MEMORANDUM FOR RECORD**  
**(Correctable Flaw Affidavit for DOT Specimen Collection)**

Date of Collection: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Collector Name (print): \_\_\_\_\_

Collector Contact Fax: \_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Other: \_\_\_\_\_

**Error Details: Use of expired Federal Custody & Control Form(CCF)**

Specimen ID #: \_\_\_\_\_

IMPORTANT: This written statement complies with 49 CFR Part 40.205 which requires the information and statements contained in this document.

**Please note:** There is no regulatory requirement (nor should a requirement be added by a non-regulating entity, organization, or person; such as a laboratory) challenging the validity of this document based on the preferences of the entity, organization, or person that the information be written, typed, or transmitted on the particular letterhead or form of the entity, organization, or person.

Pursuant to 49 CFR Part 40.205(b)(2): This form contains all the information needed for a valid drug test.

**The incorrect (expired) CCF was used due to (check reason below):**

- Inadvertently,
- As the only means of conducting the collection because a non-expired/current CCF was not available at the time of the collection, or
- Other: \_\_\_\_\_

**To prevent this error (Correctable Flaw) from occurring again in the future, I/we:**

- Have placed an order for a supply of current forms are awaiting the new CCFs,
- Will pay more attention in the future to ensure I select the correct/current form for collections, or
- Other: \_\_\_\_\_

I understand that I must maintain written documentation of this Memorandum with the CCF and must mark the CCF in such a way as to make it obvious on the face of the CCF that you corrected the flaw.

I attest that the information contained in this Memorandum is true and correct.

\_\_\_\_\_  
Collector Signature

\_\_\_\_\_  
Date

Technician should complete and distribute copies of this form on the same business day of notification/awareness of the error.