

750 Royal Oaks Drive, Suite 100
Monrovia, California 91016-3629
Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)



Laboratory Report

for

Arizona Department of Environmental Quality
1110 West Washington Street
Phoenix, AZ 85007
Attention: David Burchard

Date of Issue
02/13/2017



Eurofins Eaton
Analytical

TDF: Thomas.D.French
Project Manager



Report: 637665
Project: CANON-ED
ADHS License #: AZ0778
Group: Canon Elementary
PO#: School
PO#: ADEQ16-116686:3

* Accredited in accordance with TNI 2009 and ISO/IEC 17025:2005.

* Laboratory certifies that the test results meet all **TNI 2009 and ISO/IEC 17025:2005** requirements unless noted under the individual analysis.

* Following the cover page are State Certification List, ISO 17025 Accredited Method List, Acknowledgement of Samples Received, Comments, Hits Report, Data Report, QC Summary, QC Report and Regulatory Forms, as applicable.

* Test results relate only to the sample(s) tested.

* This report shall not be reproduced except in full, without the written approval of the laboratory.

STATE CERTIFICATION LIST

State	Certification Number	State	Certification Number
Alabama	41060	Mississippi	Certified
-----	-----	Montana	Cert 0035
Arizona	AZ0778	Nebraska	Certified
Arkansas	Certified	Nevada	CA00006-2016
California-Monrovia-ELAP	2813	New Hampshire *	2959
California-Colton- ELAP	2812	New Jersey *	CA 008
California-Folsom- ELAP	2820	New Mexico	Certified
California-Fresno- ELAP	2966	New York *	11320
Colorado	Certified	North Carolina	06701
Connecticut	PH-0107	North Dakota	R-009
Delaware	CA 006	Oregon (Primary AB) *	ORELAP 4034
Florida *	E871024	Pennsylvania *	68-565
Georgia	947	Puerto Rico	Certified
Guam	16-003r	Rhode Island	LAO00326
Hawaii	Certified	South Carolina	87016
Idaho	Certified	South Dakota	Certified
Illinois *	200033	Tennessee	TN02839
Indiana	C-CA-01	Texas *	T104704230-15-9
Kansas *	E-10268	Utah *	CA000062016-10
Kentucky	90107	Vermont	VT0114
Louisiana *	LA16003	Virginia *	460260
Maine	CA0006	Washington	C838
Maryland	224	-----	-----
Commonwealth of Northern Marianas Is.	MP0004	-----	-----
Massachusetts	M-CA006	EPA Region 5	Certified
Michigan	9906	Los Angeles County Sanitation Districts	10264

* NELAP/TNI Recognized Accreditation Bodies

ISO 17025 Accredited Method List

The tests listed below are accredited and meet the requirements of ISO 17025 as verified by the ANSI-ASQ National Accreditation Board/ANAB.

Refer to Certificate and scope of accreditation (AT 1807) found at: <http://www.eatonanalytical.com>

SPECIFIC TESTS	METHOD OR TECHNIQUE USED	Environmental (Drinking Water)	Environmental (Waste Water)	Water as a Component of Food and Bev/Bev/ Bottled Water
1,4-Dioxane	EPA 522	x		x
2,3,7,8-TCDD	Modified EPA 1613B	x		x
Acrylamide	In House Method (2440)	x		x
Alkalinity	SM 2320B	x	x	x
Ammonia	EPA 350.1		x	x
Ammonia	SM 4500-NH3 H		x	x
Anions and DBPs by IC	EPA 300.0	x	x	x
Anions and DBPs by IC	EPA 300.1	x		x
Asbestos	EPA 100.2	x	x	
Bicarbonate Alkalinity as HCO3	SM 2320B	x	x	x
BOD / CBOD	SM 5210B		x	x
Bromate	In House Method (2447)	x		x
Carbamates	EPA 531.2	x		x
Carbonate as CO3	SM 2330B	x	x	x
Carbonyls	EPA 556	x		x
COD	EPA 410.4 / SM 5220D		x	
Chloramines	SM 4500-CL G	x	x	x
Chlorinated Acids	EPA 515.4	x		x
Chlorinated Acids	EPA 555	x		x
Chlorine Dioxide	SM 4500-CLO2 D	x		x
Chlorine -Total/Free/ Combined Residual	SM 4500-Cl G	x	x	x
Conductivity	EPA 120.1		x	
Conductivity	SM 2510B	x	x	x
Corrosivity (Langelier Index)	SM 2330B	x		x
Cryptosporidium	EPA 1623	x		x
Cyanide, Amenable	SM 4500-CN G	x	x	
Cyanide, Free	SM 4500CN F	x	x	x
Cyanide, Total	EPA 335.4	x	x	x
Cyanogen Chloride (screen)	In House Method (2470)	x		x
Diquat and Paraquat	EPA 549.2	x		x
DBP/HAA	SM 6251B	x		x
Dissolved Oxygen	SM 4500-O G		x	x
DOC	SM 5310C	x		x
E. Coli (MTF/EC+MUG)		x		x
E. Coli	CFR 141.21(f)(6)(i)	x		x
E. Coli	SM 9223		x	
E. Coli (Enumeration)	SM 9221B.1/ SM 9221F	x		x
E. Coli (Enumeration)	SM 9223B	x		x
EDB/DCBP	EPA 504.1	x		
EDB/DCBP and DBP	EPA 551.1	x		x
EDTA and NTA	In House Method (2454)	x		x
Endothall	EPA 548.1	x		x
Endothall	In-house Method (2445)	x		x
Enterococci	SM 9230B	x	x	
Fecal Coliform	SM 9221 E (MTF/EC)	x		
Fecal Coliform	SM 9221C, E (MTF/EC)		x	
Fecal Coliform (Enumeration)	SM 9221E (MTF/EC)	x		x
Fecal Coliform with Chlorine Present	SM 9221E		x	
Fecal Streptococci	SM 9230B	x	x	
Fluoride	SM 4500-F C	x	x	x
Giardia	EPA 1623	x		x
Glyphosate	EPA 547	x		x
Gross Alpha/Beta	EPA 900.0	x	x	x
Gross Alpha Coprecipitation	SM 7110 C	x	x	x
Hardness	SM 2340B	x	x	x
Heterotrophic Bacteria	In House Method (2439)	x		x
Heterotrophic Bacteria	SM 9215 B	x		x
Hexavalent Chromium	EPA 218.6	x	x	x

SPECIFIC TESTS	METHOD OR TECHNIQUE USED	Environmental (Drinking Water)	Environmental (Waste Water)	Water as a Component of Food and Bev/Bev/ Bottled Water
Hexavalent Chromium	EPA 218.7	x		x
Hexavalent Chromium	SM 3500-Cr B		x	
Hormones	EPA 539	x		x
Hydroxide as OH Calc.	SM 2330B	x		x
Kjeldahl Nitrogen	EPA 351.2		x	
Legionella	CDC Legionella	x		x
Mercury	EPA 245.1	x	x	x
Metals	EPA 200.7 / 200.8	x	x	x
Microcystin LR	ELISA (2360)	x		x
NDMA	EPA 521	x		x
NDMA	TQ In house method based on EPA 521 (2425)	x		x
Nitrate/Nitrite Nitrogen	EPA 353.2	x	x	x
OCL, Pesticides/PCB	EPA 505	x		x
Ortho Phosphate	EPA 365.1	x	x	x
Ortho Phosphate	SM 4500P E			x
Ortho Phosphorous	SM 4500P E	x		
Oxyhalides Disinfection Byproducts	EPA 317.0	x		x
Perchlorate	EPA 331.0	x		x
Perchlorate (low and high)	EPA 314.0	x		x
Perfluorinated Alkyl Acids	EPA 537	x		x
pH	EPA 150.1	x		
pH	SM 4500-H+B	x	x	x
Phenylurea Pesticides/ Herbicides	In House Method, based on EPA 532 (2448)	x		x
Pseudomonas	IDEXX Pseudalert (2461)	x		x
Radium-226	GA Institute of Tech	x		x
Radium-228	GA Institute of Tech	x		x
Radon-222	SM 7500RN	x		x
Residue, Filterable	SM 2540C	x	x	x
Residue, Non-filterable	SM 2540D		x	
Residue, Total	SM 2540B		x	x
Residue, Volatile	EPA 160.4		x	
Semi-VOC	EPA 525.2	x		x
Semi-VOC	EPA 625		x	x
Silica	SM 4500-Si D	x	x	
Silica	SM 4500-SiO2 C	x	x	
Sulfide	SM 4500-S ⁻ D		x	
Sulfite	SM 4500-SO ³ B	x	x	x
Surfactants	SM 5540C	x	x	x
Taste and Odor Analytes	SM 6040E	x		x
Total Coliform (P/A)	SM 9221 A, B	x		x
Total Coliform (Enumeration)	SM 9221 A, B, C	x		x
Total Coliform / E. coli	Colisure SM 9223	x		x
Total Coliform	SM 9221B		x	
Total Coliform with Chlorine Present	SM 9221B		x	
Total Coliform / E.coli (P/A and Enumeration)	SM 9223	x		x
TOC	SM 5310C	x	x	x
TOX	SM 5320B		x	
Total Phenols	EPA 420.1		x	
Total Phenols	EPA 420.4	x	x	x
Total Phosphorous	SM 4500 P E		x	
Turbidity	EPA 180.1	x	x	x
Turbidity	SM 2130B	x	x	
Uranium by ICP/MS	EPA 200.8	x		x
UV 254	SM 5910B	x		
VOC	EPA 524.2/EPA 524.3	x		x
VOC	EPA 624		x	x
VOC	EPA SW 846 8260	x		x
VOC	In House Method (2411)	x		x
Yeast and Mold	SM 9610	x		x

Acknowledgement of Samples Received

Addr: **Arizona Department of Environmental Quality**
1110 West Washington Street
Phoenix, AZ 85007

Client ID: ADEQ-LEAD

Folder #: 637665

Project: CANON-ED

Sample Group: Canon Elementary School

Attn: David Burchard
Phone: (602) 771-4298

Project Manager: Thomas.D.French
Phone: (480) 778-1558
Sampler: A. Jangule and D. Merrill

The following samples were received from you on **February 08, 2017** at **1209**. They have been scheduled for the tests listed below each sample. If this information is incorrect, please contact your service representative. Thank you for using Eurofins Eaton Analytical.

Sample #	Sample ID	Sample Date
<u>201702080839</u>	1	02/03/2017 0700
Sample Type: Bathroom in Super Office Facility ID: District Sample Point ID: Bathroom in Super Office		
@ICPMS Freight - Outbound Freight - Return		
<u>201702080840</u>	2	02/03/2017 0700
Sample Type: Kitchen Sink Facility ID: District Kitchen Sample Point ID: Kitchen		
@ICPMS		
<u>201702080841</u>	3	02/03/2017 0700
Sample Type: Bathroom Faucet Facility ID: Annex Sample Point ID: Bathroom		
@ICPMS		
<u>201702080842</u>	4	02/06/2017 0700
Sample Type: Drinking Fountain Facility ID: Annex Fountain Sample Point ID: Outside Annex		
@ICPMS		
<u>201702080843</u>	5	02/06/2017 0700
Sample Type: Drinking Fountain (Outside) Facility ID: Gym Sample Point ID: Outside Gym		
@ICPMS		
<u>201702080844</u>	6	02/03/2017 0700
Sample Type: Nurses Main Sink Facility ID: Main Building Sample Point ID: Nurses Office		
@ICPMS		

Test Description

@ICPMS -- ICPMS Metals

Invoice: Customer: K#158033 Date: 31 Jan 17 Wgt: 9.00 LBS SHIPPING: 0.00 SPECIAL: 0.00 HANDLING: 0.00 TOTAL: 0.00
 PO Number: DV: 0.00 TRACK: 720479459970

Sample Collection Record

To be completed by the sample collector

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Canon Elem. SD #50
Name of School	Canon ESD
Building (name/number)	District
Type of Fixture (tap, drinking fountain etc.)	Bathroom in Super office
Location of Fixture (example, room number)	"
Sample Identification Number (ensure this number is also on the sample container)	1
Date of Collection	2-3-17
Time of Collection	7:00 am
Name of Sample Collector	Angela Jangula
Signature Sample Collector	Angela E. Jangula

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Rec: JKR

FEA

2.8.17

1209

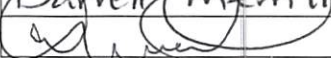
12

Sample Collection Record

To be completed by the sample collector

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Canon Elem. SD #50
Name of School	Canon ES
Building (name/number)	District Kitchen
Type of Fixture (tap, drinking fountain etc.)	Kitchen sink
Location of Fixture (example, room number)	Kitchen
Sample Identification Number (ensure this number is also on the sample container)	2
Date of Collection	2-3-17
Time of Collection	7:00 PM
Name of Sample Collector	Darrell Merrill
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

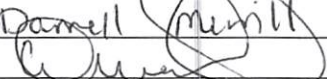
These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

To be completed by the sample collector

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Canon GSD #50
Name of School	Canon ES
Building (name/number)	Annex
Type of Fixture (tap, drinking fountain etc.)	bathroom faucet
Location of Fixture (example, room number)	00 bathroom
Sample Identification Number (ensure this number is also on the sample container)	3
Date of Collection	2-3-17
Time of Collection	7:00 am
Name of Sample Collector	Danell Merrill
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

To be completed by the sample collector

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label. R

- ☒ Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Canon ESD #50
Name of School	Canon ES
Building (name/number)	Annex Fountain
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	outside annex
Sample Identification Number (ensure this number is also on the sample container)	4
Date of Collection	2-6-17
Time of Collection	7:00 am
Name of Sample Collector	Angela Sanguale
Signature Sample Collector	<i>Angela E. Sanguale</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

To be completed by the sample collector

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

☒ Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Canon ESD #50
Name of School	Canon ESD
Building (name/number)	Gym
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain (outside)
Location of Fixture (example, room number)	outside gym
Sample Identification Number (ensure this number is also on the sample container)	5
Date of Collection	2-6-17
Time of Collection	7:00am
Name of Sample Collector	Angele Sengula
Signature Sample Collector	Angele E. Sengula

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

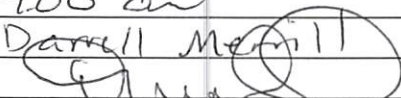
Sample Collection Record

To be completed by the sample collector

M

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☐ Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Canon ESD # 50
Name of School	Canon ES
Building (name/number)	Main Building
Type of Fixture (tap, drinking fountain etc.)	Nurses main Sink
Location of Fixture (example, room number)	nurses office
Sample Identification Number (ensure this number is also on the sample container)	6
Date of Collection	2-3-17
Time of Collection	1:00 pm
Name of Sample Collector	Darrell McMill
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

750 Royal Oaks Drive, Suite 100
Monrovia, California 91016-3629
(626) 386-1100 FAX (626) 386-1101

Kit #: 158033



Created By: Thomas.D.French - [TDF]
Deliver By: 02/02/2017

STG: Bottle Orders
Ice Type: W

Note: Sampler Please return this paper with your samples

Client ID: ADEQ-LEAD
Project Code: CANON-ED Bottle Orders
Group Name: Canon Elementary School
PO#/JOB#:

Ship Sample Kits to Canon Elementary School District 34630 E. School Loop Road Black Canyon City, AZ 85324 Attn: Angela Jangula Phone: (480) 227-0921

Send Report to Arizona Department of Environmental Quality 1110 West Washington Street Phoenix, AZ 85007 Attn: David Burchard Phone: (602) 771-4298
--

Billing Address Arizona Department of Environmental Quality 1110 West Washington Street Phoenix, AZ 85007 Attn: ADEQ Phone: (602) 771-1936

of

Sample Tests

6

@ICPMS

Bottle Qty - Type [preservative Information]

1 - 250ml poly [no preservative]

UN DOT #

Comments

Canon Elementary School - Include Canon Elementary School District Full Sample list, 6 Lead Sampling Plan Records, packing instructions for return shipment to Eurofins Eaton Analytical, Inc. 750 Royal Oaks Drive, Suite C, Monrovia, CA 91016. 6 sample containers. Return Shipment Fed EX

Sampler - please refer to Sampling Plan Records for instructions on completing paperwork and what to include with return shipment of the samples.

Code

Status

Date Shipped

Via

Tracking #

of Coolers

Prepared By

Canon Elementary District	Canon Elementary School	1001	Annex	Speech / Storage / Classroom	1982	19630 E. School Loop Road	Black Canyon City	85324-0089	Yavapai	2 Annex
Canon Elementary District	Canon Elementary School	1002	Gymnasium	Gym	1989	19630 E. School Loop Road	Black Canyon City	85324-0089	Yavapai	1 Sym
Canon Elementary District	Canon Elementary School	1003	Mobile	District Office	1985	19630 E. School Loop Road	Black Canyon City	85324-0089	Yavapai	2 dis m ⁴
Canon Elementary District	Canon Elementary School	1004	K - 8 School	Classrooms	2001	19630 E. School Loop Road	Black Canyon City	85324-0089	Yavapai	1 school
Total Containers										6

Sampling Plan & Collection Record

Public School Lead Drinking Water Screening Program

Use these procedures for collecting samples of water for lead testing at school. This protocol is part of a proactive program to screen the drinking water at Arizona schools for lead. Schools will be provided a sampling kit that will include this form, a list of school buildings to sample, sampling containers and return shipping if needed.

Sample Locations

When possible select two sampling locations from each building built before 1987 and as instructed for newer buildings. Prioritize sampling locations based on how frequently someone could drink from them. The chart below should be used to select sampling locations.

Recommended		Not Recommended
Drinking fountains	Bathroom sinks	
Preschool classrooms	Janitor closets	
Cafeteria and kitchen sinks	Hose bibs	
Nurse's/health office sinks	Taps attached to water softeners	
Home economics room sinks	Taps attached Point of Use devices	
Any sink known to be or visibly used for consumption	Fixtures where human consumption of the water is not likely to occur	

Sample Collection

1. Collect all water samples before the facility opens for the day and any water usage occurs.
2. The water must have sat in the pipes for at least six hours before a sample is taken.
3. Collect samples in the container(s) provided by completing the following steps:
 - 1) Open sample container
 - 2) Hold sample container under fixture (**cold water only**)
 - 3) Turn on fixture
 - 4) Fill sample container
 - 5) Close sample container tightly
- ✕ 4. Assign a **unique** sample identification number to each sample. Record that number on the Sample Collection Record form and sample container.
5. Accurately complete the "**Sample Collection Record**" provided immediately following the collection of each sample. Use a Sharpie brand pen to fill out the form. **Accurate information about the sample is essential.**
6. Ship the samples as instructed within 3 days. Place all Sample Collection Records in a water tight container such as a zip lock bag. Keep the Sample Collection Record with the samples. **PLEASE RETURN THE KIT ORDER FORM that accompanies the sample kits for each school with this paperwork also.** The lab (Eurofins Eaton Analytical, Inc.) must receive the sample within 10 days in order for them to be analyzed.

For more information see our Public Schools Drinking Water Lead Screening Program web site at <http://www.azdeq.gov/public-school-drinking-water-lead-screening-program>.



eurofins

Eaton Analytical

INTERNAL CHAIN OF CUSTODY RECORD

COMPANY NAME / EEA CLIENT CODE:	PROJECT CODE:
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SAMPLE TEMP RECEIVED:

IR Gun ID = 461A (Observation = 18.6 °C) (Corr.Factor = -0.3 °C) (Final = 18.3 °C)

SAMPLES REC'D DAY OF COLLECTION? ☐

TYPE OF ICE: Real ☐ Synthetic ☒ No Ice ☒

CONDITION OF ICE: Frozen ☐ Partially Frozen ☐ Thawed ☐ N/A ☒

METHOD OF SHIPMENT: Pick-Up / Walk-In / FedEx / UPS / DHL / Area Fast / Top Line / Other: FedEx

Compliance Acceptance Criteria:

- 1) Chemistry: >0, ≤6°C, not frozen (NELAP) (if received after 24 hrs of sample collection)
- 2) Microbiology, Distribution: < 10°C, not frozen (can be ≥10°C if received on ice the same day as sample collection, within 8 hours)
- 3) Microbiology, Surface Water: < 10°C (if received after 2 hours of sample collection)

If out of temperature range for both Chemistry and Microbiology samples and temperature does not confirm, then measure the temperature of each quadrant and record each temperature of the quadrants

1 - (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)	2 - (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)
3 - (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)	4 - (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)

4) UCMR3 : 524.3: (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)
(non-GLEC)

522: (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)

≤ 10°C if received within 48 hours of sample collection (not the same business day); -5 to 6°C if received after 48 hours of sample collection. Measure temperature for each method above.

5) LT2: Giardia /Cryptosporidium: <20 °C, not frozen (received after 8 hours of sample collection)

E. Coli: < 10°C, not frozen (if received after 2 hours of sample collection)

Giardia/Crypto: (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)

E.Coli: (Observation = _____ °C) (Corr.Factor = _____ °C) (Final = _____ °C)

6) Dioxin (1613 or 2,3,7,8 TCDD): must be between 0-4 °C, not frozen (if received after 24 hrs of sample collection)

Note: If samples are out of temperature range, let the ASMs know. ASMs will determine whether to proceed with analysis or not.

RECEIVED BY: 	PRINT NAME: <u>JSR</u>	COMPANY/TITLE: <u>Eurofins Eaton Analytical</u>	DATE: <u>2-8-17</u>	TIME: <u>1209</u>
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Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)

Laboratory Comments
Report: 637665

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)

Laboratory Hits
Report: 637665

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Samples Received on:
02/08/2017 1209

Analyzed	Analyte	Sample ID	Result	Federal MCL	Units	MRL
02/11/2017 15:36	Lead Total ICAP/MS	201702080839 <u>1</u>	2.0	15	ug/L	0.5
02/11/2017 15:36	Lead Total ICAP/MS	201702080840 <u>2</u>	0.79	15	ug/L	0.5
02/11/2017 15:37	Lead Total ICAP/MS	201702080841 <u>3</u>	1.5	15	ug/L	0.5
02/11/2017 15:40	Lead Total ICAP/MS	201702080842 <u>4</u>	1.5	15	ug/L	0.5
02/11/2017 15:42	Lead Total ICAP/MS	201702080843 <u>5</u>	2.0	15	ug/L	0.5
02/11/2017 15:43	Lead Total ICAP/MS	201702080844 <u>6</u>	2.0	15	ug/L	0.5

SUMMARY OF POSITIVE DATA ONLY

Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)

Laboratory Data
Report: 637665

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Samples Received on:
02/08/2017 1209

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
1 (201702080839)						Sampled on 02/03/2017 0700			
Sample Type: Bathroom in Super Office Facility ID: District Sample Point ID: Bathroom in Super Office									
EPA 200.8 - ICPMS Metals									
02/11/17	02/11/17 15:36	969311	969323	(EPA 200.8)	Lead Total ICAP/MS	2.0	ug/L	0.5	1
2 (201702080840)						Sampled on 02/03/2017 0700			
Sample Type: Kitchen Sink Facility ID: District Kitchen Sample Point ID: Kitchen									
EPA 200.8 - ICPMS Metals									
02/11/17	02/11/17 15:36	969311	969323	(EPA 200.8)	Lead Total ICAP/MS	0.79	ug/L	0.5	1
3 (201702080841)						Sampled on 02/03/2017 0700			
Sample Type: Bathroom Faucet Facility ID: Annex Sample Point ID: Bathroom									
EPA 200.8 - ICPMS Metals									
02/11/17	02/11/17 15:37	969311	969323	(EPA 200.8)	Lead Total ICAP/MS	1.5	ug/L	0.5	1
4 (201702080842)						Sampled on 02/06/2017 0700			
Sample Type: Drinking Fountain Facility ID: Annex Fountain Sample Point ID: Outside Annex									
EPA 200.8 - ICPMS Metals									
02/11/17	02/11/17 15:40	969311	969323	(EPA 200.8)	Lead Total ICAP/MS	1.5	ug/L	0.5	1
5 (201702080843)						Sampled on 02/06/2017 0700			
Sample Type: Drinking Fountain (Outside) Facility ID: Gym Sample Point ID: Outside Gym									
EPA 200.8 - ICPMS Metals									
02/11/17	02/11/17 15:42	969311	969323	(EPA 200.8)	Lead Total ICAP/MS	2.0	ug/L	0.5	1
6 (201702080844)						Sampled on 02/03/2017 0700			
Sample Type: Nurses Main Sink Facility ID: Main Building Sample Point ID: Nurses Office									
EPA 200.8 - ICPMS Metals									
02/11/17	02/11/17 15:43	969311	969323	(EPA 200.8)	Lead Total ICAP/MS	2.0	ug/L	0.5	1

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ICPMS Metals

Prep Batch: 969311 Analytical Batch: 969323

201702080839	1
201702080840	2
201702080841	3
201702080842	4
201702080843	5
201702080844	6

Analysis Date: 02/11/2017

Analyzed by: RPD
Analyzed by: RPD
Analyzed by: RPD
Analyzed by: RPD
Analyzed by: RPD
Analyzed by: RPD

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QC Type	Analyte	Native	Spiked	Recovered	Units	Yield (%)	Limits (%)	RPDLimit (%)	RPD%
ICPMS Metals by EPA 200.8									
Analytical Batch: 969323					Analysis Date: 02/11/2017				
LCS1	Lead Total ICAP/MS		20	19.5	ug/L	98	(85-115)		
LCS2	Lead Total ICAP/MS		20	19.6	ug/L	98	(85-115)	20	0.51
MBLK	Lead Total ICAP/MS			<0.5	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.516	ug/L	103	(50-150)		
MS_201702080743	Lead Total ICAP/MS	ND	20	21.3	ug/L	107	(70-130)		
MS2_201702080841	Lead Total ICAP/MS	1.5	20	22.7	ug/L	106	(70-130)		
MSD_201702080743	Lead Total ICAP/MS	ND	20	21.4	ug/L	107	(70-130)	20	0.47
MSD2_201702080841	Lead Total ICAP/MS	1.5	20	22.2	ug/L	104	(70-130)	20	2.2

Spike recovery is already corrected for native results.

Spikes which exceed Limits and Method Blanks with positive results are highlighted by Underlining.

Criteria for MS and Dup are advisory only, batch control is based on LCS. Criteria for duplicates are advisory only, unless otherwise specified in the method.

RPD not calculated for LCS2 when different a concentration than LCS1 is used.

RPD not calculated for Duplicates when the result is not five times the MRL (Minimum Reporting Level).

(S) - Indicates surrogate compound.

(I) - Indicates internal standard compound.