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AT-1807

Laboratory Report

for

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

Date of Issue
03/01/2017


Eurofins Eaton
Analytical

TDF: Thomas.D.French
Project Manager



ORELAP 4034

Report: 641335
Project: CJ-ED
ADHS License #: AZ0778
Group: Clarkdale-Jerome
PO#: Elementary 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/DBCP 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

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

Client ID: ADEQ-LEAD
Folder #: 641335
Project: CJ-ED
Sample Group: Clarkdale-Jerome Elementary School

Project Manager: Thomas.D.French
Phone: (480) 778-1558
PO #: ADEQ16-116686:3
Sampler: David Chapman

The following samples were received from you on **February 24, 2017** at **1248**. 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>201702240313</u>	1	02/22/2017 0530
	Sample Type: Sink Salad Prep Facility ID: Kitchen D	
	@ICPMS	Freight - Outbound
		Freight - Return
<u>201702240314</u>	2	02/22/2017 0530
	Sample Type: Sink Prep Facility ID: Kitchen D	
	@ICPMS	
<u>201702240315</u>	3	02/22/2017 0600
	Sample Type: Drinking Fountain Facility ID: C	
	@ICPMS	
<u>201702240316</u>	4	02/22/2017 0705
	Sample Type: DrinkingFountain Facility ID: D Sample Point ID: Boy B.R.	
	@ICPMS	
<u>201702240317</u>	5	02/22/2017 0706
	Sample Type: Drinking Fountain Facility ID: D Sample Point ID: Girl B.R.	
	@ICPMS	
<u>201702240318</u>	6	02/22/2017 0710
	Sample Type: Drinking Fountain Facility ID: G Sample Point ID: Outside next to Bathroom	
	@ICPMS	
<u>201702240319</u>	7	02/22/2017 0711
	Sample Type: Drinking Fountain Facility ID: G Sample Point ID: Class Room	
	@ICPMS	
<u>201702240320</u>	8	02/22/2017 0712
	Sample Type: Drinking Fountain Facility ID: G Sample Point ID: Outside next to Storage	
	@ICPMS	

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Sample #	Sample ID	Sample Date
<u>201702240321</u>	9	02/22/2017 0714
	Sample Type: Drinking Fountain Facility ID: F Sample Point ID: Inside Class Room @ICPMS	
<u>201702240322</u>	10	02/22/2017 0715
	Sample Type: Sink Facility ID: F Sample Point ID: Nurses Office @ICPMS	
<u>201702240323</u>	11	02/22/2017 0725
	Sample Type: Drinking Fountain Facility ID: A Sample Point ID: Front Office @ICPMS	
<u>201702240324</u>	12	02/22/2017 0727
	Sample Type: Drinking Fountain Facility ID: A Sample Point ID: Back Office @ICPMS	
<u>201702240325</u>	14	02/22/2017 0732
	Sample Type: Drinking Fountain Facility ID: B Sample Point ID: Center Room @ICPMS	
<u>201702240326</u>	14	02/22/2017 0733
	Sample Type: Drinking Fountain Facility ID: B Sample Point ID: Work Room @ICPMS	
<u>201702240327</u>	15	02/22/2017 0741
	Sample Type: Drinking Fountain Facility ID: E Sample Point ID: Inside Classroom @ICPMS	
<u>201702240328</u>	16	02/22/2017 0740

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Sample #	Sample ID	Sample Date
	Sample Type: Drinking Fountain Facility ID: E Sample Point ID: Inside Classroom @ICPMS	
<u>201702240329</u>	17	02/22/2017 0745
	Sample Type: Sink Facility ID: H Sample Point ID: Bus Barn @ICPMS	
<u>201702240330</u>	18	02/22/2017 0747
	Sample Type: Sink Facility ID: H Sample Point ID: A17 Room @ICPMS	

Test Description

@ICPMS -- ICPMS Metals

Sample Collection Record

To be completed by the sample collector

641335

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	#3
Name of School	Clarkdale - Jerome D
Building (name/number)	Kitchen D
Type of Fixture (tap, drinking fountain etc.)	Sink S&L Prep
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	1
Date of Collection	2-22-17
Time of Collection	5:30 AM
Name of Sample Collector	David Chapman
Signature Sample Collector	<i>[Signature]</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	<i>[Signature]</i>
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

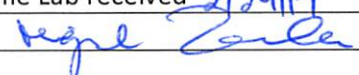
To be completed by the sample collector

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	# 3
Name of School	Clarkdale - Jerome Sch.
Building (name/number)	Kitchen D
Type of Fixture (tap, drinking fountain etc.)	Sink Prep
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	2
Date of Collection	2-22-17
Time of Collection	5:30
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Sample Collection Record

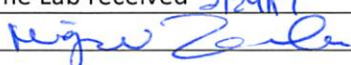
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Name of School District	# 3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	2
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	3
Date of Collection	2-22-17
Time of Collection	6:00
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Sample Collection Record


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- ☐ 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	# 3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	D
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Boy B.R.
Sample Identification Number (ensure this number is also on the sample container)	4
Date of Collection	2-22-17
Time of Collection	7:05
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	
Notes:	

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Relinquished date and signature _____


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Sample Collection Record



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Name of School District	# 3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	D
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Girl B.R.
Sample Identification Number (ensure this number is also on the sample container)	5
Date of Collection	2-22-17
Time of Collection	7:06 AM
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	 2/24/17 12:48
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Sample Collection Record

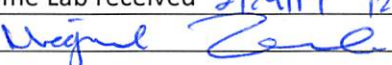
To be completed by the sample collector

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- ☐ 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	# 3
Name of School	Markdale - Jerome - Sch
Building (name/number)	B 6
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	outside next to Bathroom
Sample Identification Number (ensure this number is also on the sample container)	6
Date of Collection	2-22-17
Time of Collection	7:10
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Sample Collection Record

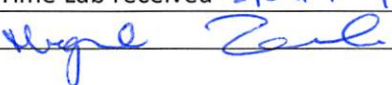
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- ☐ Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	# 3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	6
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	class room
Sample Identification Number (ensure this number is also on the sample container)	7
Date of Collection	2-22-17
Time of Collection	7:11
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

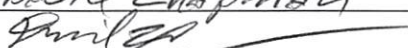
These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

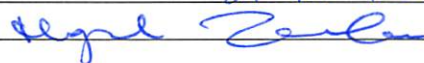
To be completed by the sample collector

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	# 3
Name of School	Charlotte-Jerome Sch
Building (name/number)	6
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	outside next to storage
Sample Identification Number (ensure this number is also on the sample container)	8
Date of Collection	2-22-17
Time of Collection	7:12
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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

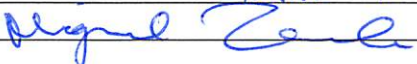
To be completed by the sample collector

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- ☐ 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	# 3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	F
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	inside Classroom
Sample Identification Number (ensure this number is also on the sample container)	9
Date of Collection	2-22-17
Time of Collection	7:14
Name of Sample Collector	Daniel Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

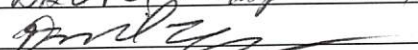
These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

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	# 3
Name of School	Charlotte-Jerome Sch
Building (name/number)	F
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain Sink
Location of Fixture (example, room number)	Outside Nurses Office
Sample Identification Number (ensure this number is also on the sample container)	10
Date of Collection	2-22-17
Time of Collection	7:15
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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

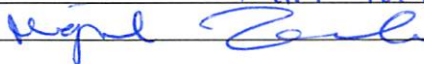
To be completed by the sample collector

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	#3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	A
Type of Fixture (tap, drinking fountain etc.)	Drink Fountain
Location of Fixture (example, room number)	Front Office
Sample Identification Number (ensure this number is also on the sample container)	11
Date of Collection	2-22-17
Time of Collection	7:25
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

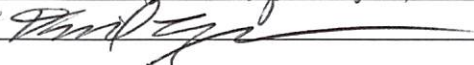
These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

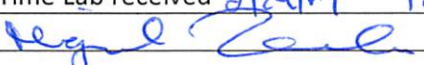
To be completed by the sample collector

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	# 3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	A
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Back Office
Sample Identification Number (ensure this number is also on the sample container)	12
Date of Collection	2-22-17
Time of Collection	7:27
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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

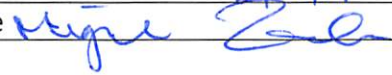
To be completed by the sample collector

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	#3
Name of School	Clarkdale - Jerome Sch
Building (name/number)	B
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Center Room
Sample Identification Number (ensure this number is also on the sample container)	13
Date of Collection	2-22-17
Time of Collection	7:32
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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

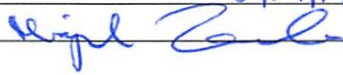
To be completed by the sample collector

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	#3
Name of School	Clarkdale Jerome Sch
Building (name/number)	B
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Work Room
Sample Identification Number (ensure this number is also on the sample container)	14
Date of Collection	2-22-17
Time of Collection	7:33
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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

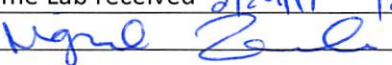
To be completed by the sample collector

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	#3
Name of School	Clarkdale-Jerome Sch
Building (name/number)	E
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	inside Classroom
Sample Identification Number (ensure this number is also on the sample container)	15
Date of Collection	2-22-17
Time of Collection	7:41
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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

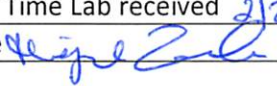
To be completed by the sample collector

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	# 3
Name of School	Clarkdale - Jerome sch
Building (name/number)	F
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Inside Classroom
Sample Identification Number (ensure this number is also on the sample container)	16
Date of Collection	2-22-17
Time of Collection	7:40
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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

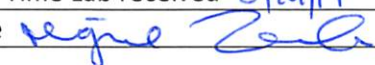
To be completed by the sample collector

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	# 3
Name of School	Clarkdale-Jerome Sch
Building (name/number)	H
Type of Fixture (tap, drinking fountain etc.)	Sink
Location of Fixture (example, room number)	Bus Barn
Sample Identification Number (ensure this number is also on the sample container)	17
Date of Collection	2-22-17
Time of Collection	7:45
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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.


641335

Sample Collection Record

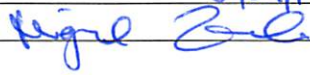
To be completed by the sample collector

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	# 3
Name of School	Clarkdale - Jerome Sch.
Building (name/number)	H
Type of Fixture (tap, drinking fountain etc.)	Sink
Location of Fixture (example, room number)	A17 Room
Sample Identification Number (ensure this number is also on the sample container)	18
Date of Collection	2-22-17
Time of Collection	7:47
Name of Sample Collector	David Chapman
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	2/24/17 12:48
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 #: 158037



Created By: Thomas.D.French - [TDF]
Deliver By: 02/03/2017

STG: Bottle Orders

Ice Type: W

Note: Sampler Please return this paper with your samples

Client ID: ADEQ-LEAD
Project Code: CJ-ED Bottle Orders
Group Name: Clarkdale-Jerome Elementary School
PO#/JOB#:

Ship Sample Kits to
Clarkdale-Jerome Elementary District
1615 Main Street
Clarksdale, AZ 86324

Attn: Kathleen Fleenor-Superintendent

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

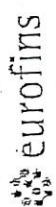
Attn: ADEQ
Phone: (602) 771-1936

# of Sample	Tests	Bottle Qty - Type [preservative information]	UN DOT #
18	@ICPMS	1 - 250ml poly [no preservative]	

Comments

Clarkdale-Jerome Elementary School - Include Clarkdale-Jerome Elementary District Full Sample list, 18 Lead Sampling Plan Records, packing instructions for return shipment to Eurofins Eaton Analytical, Inc.
750 Royal Oaks Drive, Suite C, Monrovia, CA 91016. 18 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.



Eaton Analytical

INTERNAL CHAIN OF CUSTODY RECORD

EEA Folder Number: _____

SAMPLES REC'D DAY OF COLLECTION? _____

SAMPLE TEMP RECEIVED:

IR Gun ID = 461A (Observation = 14.7 °C) (Corr. Factor = 3 °C) (Final = 14.4 °C)

TYPE OF ICE: Real _____ Synthetic _____ No Ice X

CONDITION OF ICE: Frozen _____ Partially Frozen _____ Thawed N/A

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

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); ≤ 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: <u>MAN</u>	PRINT NAME: <u>MAN</u>	COMPANY/TITLE: <u>Eurofins Eaton Analytical</u>	DATE: <u>2-25-17</u>	TIME: <u>12:48</u>
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Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1001	Building A	Administration, Art, Library	1984	P O Box 248	Clarkdale	86324-0248	Yavapai	2
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1002	Building B	Classrooms	1984	P O Box 248	Clarkdale	86324-0248	Yavapai	2
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1003	Building C	Classrooms & Lab	1984	P O Box 248	Clarkdale	86324-0248	Yavapai	2
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1004	Building D	Gym, Storage	1984	P O Box 248	Clarkdale	86324-0248	Yavapai	2
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1005	Building E	Classrooms, Special Ed.	1986	P O Box 248	Clarkdale	86324-0248	Yavapai	2
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1006	Building F	Classrooms	1989	P O Box 248	Clarkdale	86324-0248	Yavapai	1
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1007	Building G	Classrooms	1989	P O Box 248	Clarkdale	86324-0248	Yavapai	1
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1008	Building H	Bus Barn, Maintenance	1986	P O Box 248	Clarkdale	86324-0248	Yavapai	2

Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1009	Building I	Athletic Storage	1989	P O Box 248	Clarkdale	86324-0248	Yavapai	1
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1010	Storage	2 Storage Units	1989	P O Box 248	Clarkdale	86324-0248	Yavapai	1
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1011	Building A Addition	Admin, Library	2002	P O Box 248	Clarkdale	86324-0248	Yavapai	1
Clarkdale-Jerome Elementary District	Clarkdale-Jerome Elementary School	1012	Building D Addition	Gym, Kitchen	2002	P O Box 248	Clarkdale	86324-0248	Yavapai	1
Total Containers										18

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>.

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

Laboratory Comments
Report: 641335

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

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

Samples Received on:
02/24/2017 1248

Analyzed	Analyte	Sample ID	Result	Federal MCL	Units	MRL
02/28/2017 18:54	Lead Total ICAP/MS	201702240313 <u>1</u>	2.4	15	ug/L	0.5
02/28/2017 18:55	Lead Total ICAP/MS	201702240314 <u>2</u>	2.9	15	ug/L	0.5
02/28/2017 18:58	Lead Total ICAP/MS	201702240315 <u>3</u>	3.2	15	ug/L	0.5
02/28/2017 19:00	Lead Total ICAP/MS	201702240316 <u>4</u>	3.2	15	ug/L	0.5
02/28/2017 19:01	Lead Total ICAP/MS	201702240317 <u>5</u>	3.1	15	ug/L	0.5
02/28/2017 19:02	Lead Total ICAP/MS	201702240318 <u>6</u>	1.3	15	ug/L	0.5
02/28/2017 19:03	Lead Total ICAP/MS	201702240319 <u>7</u>	4.0	15	ug/L	0.5
02/28/2017 19:04	Lead Total ICAP/MS	201702240320 <u>8</u>	6.4	15	ug/L	0.5
02/28/2017 19:08	Lead Total ICAP/MS	201702240321 <u>9</u>	1.1	15	ug/L	0.5
02/28/2017 19:15	Lead Total ICAP/MS	201702240324 <u>12</u>	23	15	ug/L	0.5
02/28/2017 19:21	Lead Total ICAP/MS	201702240325 <u>14</u>	3.3	15	ug/L	0.5
02/28/2017 19:22	Lead Total ICAP/MS	201702240326 <u>14</u>	43	15	ug/L	0.5
02/28/2017 19:23	Lead Total ICAP/MS	201702240327 <u>15</u>	2.4	15	ug/L	0.5
02/28/2017 19:25	Lead Total ICAP/MS	201702240328 <u>16</u>	7.6	15	ug/L	0.5
02/28/2017 19:26	Lead Total ICAP/MS	201702240329 <u>17</u>	9.0	15	ug/L	0.5
		201702240330 <u>18</u>				

SUMMARY OF POSITIVE DATA ONLY

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

Laboratory Hits
Report: 641335

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

Samples Received on:
02/24/2017 1248

Analyzed	Analyte	Sample ID	Result	Federal MCL	Units	MRL
02/28/2017 19:27	Lead Total ICAP/MS		11	15	ug/L	0.5

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

Laboratory Data
Report: 641335

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

Samples Received on:
02/24/2017 1248

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
1 (201702240313)						Sampled on 02/22/2017 0530			
Sample Type: Sink Salad Prep Facility ID: Kitchen D									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 18:54	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	2.4	ug/L	0.5	1
2 (201702240314)						Sampled on 02/22/2017 0530			
Sample Type: Sink Prep Facility ID: Kitchen D									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 18:55	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	2.9	ug/L	0.5	1
3 (201702240315)						Sampled on 02/22/2017 0600			
Sample Type: Drinking Fountain Facility ID: C									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 18:58	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	3.2	ug/L	0.5	1
4 (201702240316)						Sampled on 02/22/2017 0705			
Sample Type: DrinkingFountain Facility ID: D Sample Point ID: Boy B.R.									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:00	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	3.2	ug/L	0.5	1
5 (201702240317)						Sampled on 02/22/2017 0706			
Sample Type: Drinking Fountain Facility ID: D Sample Point ID: Girl B.R.									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:01	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	3.1	ug/L	0.5	1
6 (201702240318)						Sampled on 02/22/2017 0710			
Sample Type: Drinking Fountain Facility ID: G Sample Point ID: Outside next to Bathroom									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:02	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	1.3	ug/L	0.5	1
7 (201702240319)						Sampled on 02/22/2017 0711			
Sample Type: Drinking Fountain Facility ID: G Sample Point ID: Class Room									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:03	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	4.0	ug/L	0.5	1
8 (201702240320)						Sampled on 02/22/2017 0712			
Sample Type: Drinking Fountain Facility ID: G Sample Point ID: Outside next to Storage									

Rounding on totals after summation.
(c) - indicates calculated results

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Laboratory Data
Report: 641335

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

Samples Received on:
02/24/2017 1248

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:04	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	6.4	ug/L	0.5	1
9 (201702240321)						Sampled on 02/22/2017 0714			
Sample Type: Drinking Fountain									
Facility ID: F									
Sample Point ID: Inside Class Room									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:08	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	1.1	ug/L	0.5	1
10 (201702240322)						Sampled on 02/22/2017 0715			
Sample Type: Sink									
Facility ID: F									
Sample Point ID: Nurses Office									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:09	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
11 (201702240323)						Sampled on 02/22/2017 0725			
Sample Type: Drinking Fountain									
Facility ID: A									
Sample Point ID: Front Office									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:10	973740	974008	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
12 (201702240324)						Sampled on 02/22/2017 0727			
Sample Type: Drinking Fountain									
Facility ID: A									
Sample Point ID: Back Office									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:15	973740	974009	(EPA 200.8)	Lead Total ICAP/MS	23	ug/L	0.5	1
14 (201702240325)						Sampled on 02/22/2017 0732			
Sample Type: Drinking Fountain									
Facility ID: B									
Sample Point ID: Center Room									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:21	973740	974009	(EPA 200.8)	Lead Total ICAP/MS	3.3	ug/L	0.5	1
14 (201702240326)						Sampled on 02/22/2017 0733			
Sample Type: Drinking Fountain									
Facility ID: B									
Sample Point ID: Work Room									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:22	973740	974009	(EPA 200.8)	Lead Total ICAP/MS	43	ug/L	0.5	1
15 (201702240327)						Sampled on 02/22/2017 0741			
Sample Type: Drinking Fountain									
Facility ID: E									
Sample Point ID: Inside Classroom									
EPA 200.8 - ICPMS Metals									

Rounding on totals after summation.
(c) - indicates calculated results

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Laboratory Data
Report: 641335

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

Samples Received on:
02/24/2017 1248

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
02/27/17	02/28/17 19:23	973740	974009	(EPA 200.8)	Lead Total ICAP/MS	2.4	ug/L	0.5	1
16 (201702240328)						Sampled on 02/22/2017 0740			
Sample Type: Drinking Fountain Facility ID: E Sample Point ID: Inside Classroom									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:25	973740	974009	(EPA 200.8)	Lead Total ICAP/MS	7.6	ug/L	0.5	1
17 (201702240329)						Sampled on 02/22/2017 0745			
Sample Type: Sink Facility ID: H Sample Point ID: Bus Barn									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:26	973740	974009	(EPA 200.8)	Lead Total ICAP/MS	9.0	ug/L	0.5	1
18 (201702240330)						Sampled on 02/22/2017 0747			
Sample Type: Sink Facility ID: H Sample Point ID: A17 Room									
EPA 200.8 - ICPMS Metals									
02/27/17	02/28/17 19:27	973740	974009	(EPA 200.8)	Lead Total ICAP/MS	11	ug/L	0.5	1

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ICPMS Metals

Prep Batch: 973740 Analytical Batch: 974008

201702240313	1
201702240314	2
201702240315	3
201702240316	4
201702240317	5
201702240318	6
201702240319	7
201702240320	8
201702240321	9
201702240322	10
201702240323	11

Analysis Date: 02/28/2017

Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP

ICPMS Metals

Prep Batch: 973740 Analytical Batch: 974009

201702240324	12
201702240325	14
201702240326	14
201702240327	15
201702240328	16
201702240329	17
201702240330	18

Analysis Date: 02/28/2017

Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP
Analyzed by: CYP

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QC Type	Analyte	Native	Spiked	Recovered	Units	Yield (%)	Limits (%)	RPDLimit (%)	RPD%
ICPMS Metals by EPA 200.8									
Analytical Batch: 974008					Analysis Date: 02/28/2017				
LCS1	Lead Total ICAP/MS		20	19.8	ug/L	99	(85-115)		
LCS2	Lead Total ICAP/MS		20	19.8	ug/L	99	(85-115)	20	0.0
MBLK	Lead Total ICAP/MS			<0.5	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.488	ug/L	98	(50-150)		
MS_201702161013	Lead Total ICAP/MS	0.57	20	24.0	ug/L	117	(70-130)		
MS2_201702240314	Lead Total ICAP/MS	2.9	20	24.4	ug/L	108	(70-130)		
MSD_201702161013	Lead Total ICAP/MS	0.57	20	22.2	ug/L	108	(70-130)	20	7.8
MSD2_201702240314	Lead Total ICAP/MS	2.9	20	23.8	ug/L	104	(70-130)	20	2.5
ICPMS Metals by EPA 200.8									
Analytical Batch: 974009					Analysis Date: 02/28/2017				
LCS1	Lead Total ICAP/MS		20	19.7	ug/L	99	(85-115)		
LCS2	Lead Total ICAP/MS		20	19.9	ug/L	100	(85-115)	20	1.0
MBLK	Lead Total ICAP/MS			<0.5	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.492	ug/L	98	(50-150)		
MS_201702240324	Lead Total ICAP/MS	23	20	44.3	ug/L	107	(70-130)		
MS2_201702270359	Lead Total ICAP/MS	2.0	20	23.4	ug/L	107	(70-130)		
MSD_201702240324	Lead Total ICAP/MS	23	20	46.3	ug/L	117	(70-130)	20	4.4
MSD2_201702270359	Lead Total ICAP/MS	2.0	20	23.3	ug/L	106	(70-130)	20	0.43

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.