



# AQUATIC CONSULTING & TESTING, INC.

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P.O. Box 1510  
Tempe, Arizona 85281  
Phone: (480) 921-8044 • Fax: (480) 921-0049

Lic. No. AZ0003

## LABORATORY REPORT

**Client:** ADEQ  
Lead in Drinking Water School Proj.  
1110 W. Washington Street  
Phoenix, AZ 85007  
**Attn:** David Burchard

**Date Submitted:** 02/24/17  
**Date Reported:** 03/16/17

**Project:** Islands Elementary

## RESULTS

**Client ID:** 1001-01  
**ACT Lab No.:** BZ02213

**Sample Type:** Drinking Water  
**Sample Time:** 02/23/17 05:30

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	7.38	ug/L	SLM

**Client ID:** 1001-02  
**ACT Lab No.:** BZ02214

**Sample Type:** Drinking Water  
**Sample Time:** 02/23/17 05:40

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	3.26	ug/L	SLM

**Client ID:** 1002-01  
**ACT Lab No.:** BZ02215

**Sample Type:** Drinking Water  
**Sample Time:** 02/23/17 05:45

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	1.51	ug/L	SLM

**Client ID:** 1002-02  
**ACT Lab No.:** BZ02216

**Sample Type:** Drinking Water  
**Sample Time:** 02/23/17 05:50

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	2.02	ug/L	SLM

## RESULTS

Client ID: 1003-01  
ACT Lab No.: BZ02217

Sample Type: Drinking Water  
Sample Time: 02/23/17 05:52

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1003-02  
ACT Lab No.: BZ02218

Sample Type: Drinking Water  
Sample Time: 02/23/17 05:55

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	1.98	ug/L	SLM

Client ID: 1004-01  
ACT Lab No.: BZ02219

Sample Type: Drinking Water  
Sample Time: 02/23/17 05:58

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	9.20	ug/L	SLM

Client ID: 1005-01  
ACT Lab No.: BZ02220

Sample Type: Drinking Water  
Sample Time: 02/23/17 06:00

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1005-02  
ACT Lab No.: BZ02221

Sample Type: Drinking Water  
Sample Time: 02/23/17 06:05

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1006-01  
ACT Lab No.: BZ02222

Sample Type: Drinking Water  
Sample Time: 02/23/17 06:10

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	<1.00	ug/L	SLM

## RESULTS

Client ID: 1006-02  
ACT Lab No.: BZ02223

Sample Type: Drinking Water  
Sample Time: 02/23/17 06:15

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1007-01  
ACT Lab No.: BZ02224

Sample Type: Drinking Water  
Sample Time: 02/23/17 06:17

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	1.02	ug/L	SLM

Client ID: 1007-02  
ACT Lab No.: BZ02225

Sample Type: Drinking Water  
Sample Time: 02/23/17 06:20

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	1.21	ug/L	SLM

Reviewed by:   
Frederick A. Amalfi, Ph.D.  
Laboratory Director

*Uea*

# 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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 100 / 1001
Type of Fixture (tap, drinking fountain etc.)	DRINKING fountain
Location of Fixture (example, room number)	Room 7
Sample Identification Number (ensure this number is also on the sample container)	1001-01
Date of Collection	2-23-17
Time of Collection	5:30 AM
Name of Sample Collector	ROU CLAYDON
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p>Notes:</p> <div style="display: flex; justify-content: space-between; align-items: center;"> <span style="font-size: 1.2em; font-weight: bold;">BZ-02213</span> <div style="text-align: right;"> <span style="font-size: 1.2em;">15:00</span>  <span style="font-weight: bold;">FEB 24 2017</span> </div> </div>	

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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

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 100 / 1001
Type of Fixture (tap, drinking fountain etc.)	DRINKING fountain
Location of Fixture (example, room number)	Room 8
Sample Identification Number (ensure this number is also on the sample container)	1001-02
Date of Collection	2-23-17
Time of Collection	5:40 per badge #B 2/24/17
Name of Sample Collector	Ron Claydon
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p style="font-size: 24px; font-weight: bold; margin: 0;">BZ-02214</p> <p style="text-align: right; font-weight: bold; margin: 0;">15:00 FEB 24 2017</p>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

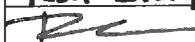
These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

# 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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	Building 200 / 1002
Type of Fixture (tap, drinking fountain etc.)	<del>Water</del> Tap
Location of Fixture (example, room number)	work room
Sample Identification Number (ensure this number is also on the sample container)	1002-01
Date of Collection	2-23-17
Time of Collection	5:45 am
Name of Sample Collector	Ron Claydon
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p>Notes:</p> <div style="text-align: center; font-size: 2em; font-weight: bold; margin-top: 20px;">BZ-02215</div> <div style="text-align: right; margin-top: 20px;">             15:00              FEB 24 2017   </div>	

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	Building 200 / 1002
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	Library office
Sample Identification Number (ensure this number is also on the sample container)	1002-02
Date of Collection	2-23-17
Time of Collection	5:50 AM
Name of Sample Collector	Ron Clayton
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p style="text-align: center; font-size: 1.2em; font-weight: bold;">BZ-02216</p> <p style="text-align: right; font-size: 1.2em;">15:00 FEB 24 2017</p>	

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 300 / 1003
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	MULTI-PURPOSE ROOM
Sample Identification Number (ensure this number is also on the sample container)	1003-01
Date of Collection	2-23-17
Time of Collection	5:52 am Per bottle #13 2/23/17
Name of Sample Collector	RON CLAYDON
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p style="text-align: center; font-size: 1.2em; font-weight: bold;">BZ-02217</p> <p style="text-align: right; font-size: 1.2em; font-weight: bold;">FEB 24 2017</p> <p style="text-align: right; font-size: 1.5em; font-weight: bold;">168</p>	

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Relinquished date and signature \_\_\_\_\_

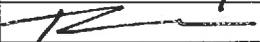
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# Sample Collection Record

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 300 / 1003
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	Kitchen
Sample Identification Number (ensure this number is also on the sample container)	1003-02
Date of Collection	2-23-17
Time of Collection	5:55 AM
Name of Sample Collector	RON CLAYDON
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
<b>BZ-02218</b>	15:00 FEB 24 2017 

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

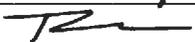
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# Sample Collection Record

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 400 / 1004
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	room 11
Sample Identification Number (ensure this number is also on the sample container)	1004-01
Date of Collection	2-23-17
Time of Collection	5:58 AM
Name of Sample Collector	Ron Claydon
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p style="text-align: center; font-size: 1.2em; font-weight: bold;">BZ-02219</p> <p style="text-align: right; font-size: 1.2em;">15:00 FEB 24 2017 16<sup>00</sup></p>	

For relinquishing samples upon delivery to labs only

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 500 / 1005
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	Rm 17
Sample Identification Number (ensure this number is also on the sample container)	1005-01
Date of Collection	2-23-17
Time of Collection	6:00 am
Name of Sample Collector	RON CLAYDON
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p>Notes:</p> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">BZ-02220</div> <div style="text-align: right; font-size: 1.2em;">             15:00              FEB 24 2017  </div>	

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	<i>Building 500 / 1005</i>
Type of Fixture (tap, drinking fountain etc.)	<i>Drinking fountain</i>
Location of Fixture (example, room number)	<i>Rm 16</i>
Sample Identification Number (ensure this number is also on the sample container)	<i>1005-02</i>
Date of Collection	<i>2-23-17</i>
Time of Collection	<i>6:05 am</i>
Name of Sample Collector	<i>Ron Claydon</i>
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	
Signature	
<p>Notes:</p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="font-size: 1.5em; font-weight: bold;">BZ-02221</div> <div style="text-align: right;"> <p><i>15:00</i> FEB 24 2017</p> <p><i>160</i></p> </div> </div>	

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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 600 / 1006
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	Rm 25
Sample Identification Number (ensure this number is also on the sample container)	1006-01
Date of Collection	2-23-17
Time of Collection	6:10 AM
Name of Sample Collector	ROB CLAYDON
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p style="text-align: center; font-size: 1.2em; font-weight: bold;">BZ-02222</p> <div style="text-align: right; margin-top: 10px;"> <p>15:00 FEB 24 2017</p>  </div>	

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	<i>BUILDING 600 / 1004</i>
Type of Fixture (tap, drinking fountain etc.)	<i>DRINKING fountain</i>
Location of Fixture (example, room number)	<i>Rm 26</i>
Sample Identification Number (ensure this number is also on the sample container)	<i>1006-02</i>
Date of Collection	<i>2-23-17</i>
Time of Collection	<i>6:15 am</i>
Name of Sample Collector	<i>Row Clayton</i>
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	
Signature	
Notes:	
<b>BZ-02223</b>	
<i>15:00</i> <b>FEB 24 2017</b>	

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For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

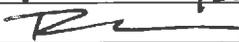
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# Sample Collection Record

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	BUILDING 700 / 1007
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	Rm 31
Sample Identification Number (ensure this number is also on the sample container)	1007-01
Date of Collection	2-23-17
Time of Collection	6:17 am
Name of Sample Collector	Row CLAYDON
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
<div style="display: flex; justify-content: space-between; align-items: center;"> <span style="font-size: 1.5em; font-weight: bold;">BZ-02224</span> <div style="text-align: right;"> <span style="font-size: 1.2em;">15:00</span>  <span style="font-weight: bold;">FEB 24 2017</span>  <span style="font-size: 1.5em;">16°C</span> </div> </div>	

For relinquishing samples upon delivery to labs only

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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	Gilbert Unified District
Name of School	Islands Elementary School
Building (name/number)	Building 700 / 1007
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	Rm 32
Sample Identification Number (ensure this number is also on the sample container)	1007-02
Date of Collection	2-23-17
Time of Collection	6:20 am
Name of Sample Collector	Ron Claydon
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
<b>BZ-02225</b>	15:00 FEB 24 2017 

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

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