



AQUATIC CONSULTING & TESTING, INC.

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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: 02/10/17

Date Reported: 02/26/17

Project: Kyrene Ele. Dist, Kyrene de la

RESULTS

Client ID: 1001-01
ACT Lab No.: BZ01485

Sample Type: Drinking Water
Sample Time: 02/07/17 00:00

<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	02/16/17	02/16/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: 1001-02
ACT Lab No.: BZ01486

Sample Type: Drinking Water
Sample Time: 02/07/17 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	02/16/17	02/16/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: 1008-01
ACT Lab No.: BZ01487

Sample Type: Drinking Water
Sample Time: 02/07/17 06:01

<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	02/16/17	02/16/17	200.8	0.0010	<0.0010	mg/L	SLM

Reviewed by:


Frederick A. Amalfi, Ph.D.

Laboratory Director

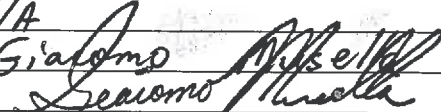
na

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	Kyrene Elementary District
Name of School	Kyrene de la Paloma School
Building (name/number)	1007
Type of Fixture (tap, drinking fountain etc.)	N/A
Location of Fixture (example, room number)	N/A
Sample Identification Number (ensure this number is also on the sample container)	1001 * per bottle - try 1007-01
Date of Collection	2-7-17
Time of Collection	N/A
Name of Sample Collector	Gialomo
Signature Sample Collector	

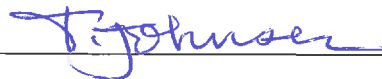
Notes Sample collector: *This Mobile Home/Security Building no longer exists.*

BZ-01485

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
@ 08:15 16°C FEB 10 2017	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

 ACT

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	Kyrene Elementary District
Name of School	Kyrene de la Paloma School
Building (name/number)	1001
Type of Fixture (tap, drinking fountain etc.)	SINK Bubbler
Location of Fixture (example, room number)	Studio/Room 30
Sample Identification Number (ensure this number is also on the sample container)	1001-02
Date of Collection	2-7-17
Time of Collection	05:55 A.M.
Name of Sample Collector	Giacomo - <i>[Signature]</i>
Signature Sample Collector	<i>[Signature]</i>

Notes Sample collector:

BZ-01486

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes: <div style="text-align: right; margin-top: 10px;"> 168 @08:15 FEB 10 2017 </div>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

T. Johnson ACT

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	Kyrene Elementary District
Name of School	Kyrene de la Paloma School
Building (name/number)	1008
Type of Fixture (tap, drinking fountain etc.)	Sink Bubbler
Location of Fixture (example, room number)	Room 41
Sample Identification Number (ensure this number is also on the sample container)	1008-01
Date of Collection	2-7-17
Time of Collection	06:01 A.M.
Name of Sample Collector	Giacomo Russell
Signature Sample Collector	<i>Giacomo Russell</i>

Notes Sample collector:	BZ-01487
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes: 16°C <div style="text-align: right;">@08:15 FEB 10 2017</div>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature *T. Johnson AC+T*

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