

80045

Collection Log

for experienced sample collectors

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	Bullhead City Elementary
School Name	Bullhead City Jr. High
Building (name/number)	Cafeteria
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Cafeteria
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	BC - 001
Date of Collection	3.29.17
Time of Collection	5:30 a.m.
Printed Name of Sample Collector	David Acero
Signature Sample Collector	David Acero by Jyl Beasley

Notes Sample collector:

550-80045 Chain of Custody



For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3.30.17 1015
Signature	[Signature]
Notes:	21.7°C FE Gr

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

①

These samples were collected for lead screening purposes only and cannot be used for compliance.

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Name of School District	Bullhead City Elementary
School Name	Bullhead City Jr. High
Building (name/number)	Cafeteria
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Cafeteria
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	BC 002
Date of Collection	3.29.17
Time of Collection	5:30 a.m.
Printed Name of Sample Collector	David Acero
Signature Sample Collector	David Acero by Jyl Brasby

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 _____

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②

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Name of School District	Bullhead City Elementary
School Name	Bullhead City Jr. High
Building (name/number)	Main Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Main Building
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	BC- 003
Date of Collection	3.29.17
Time of Collection	5:40 a.m.
Printed Name of Sample Collector	David Acero
Signature Sample Collector	David Acero by Jyl Beasley

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 _____

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Name of School District	Bullhead City - Elementary
School Name	Bullhead City Jr High
Building (name/number)	Main Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Main Building
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	BC-004
Date of Collection	5.29.17
Time of Collection	5:45 a.m.
Printed Name of Sample Collector	David Acero
Signature Sample Collector	David Acero by Jeff Beasley

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 _____

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④

Collection Log

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Name of School District	Bullhead City Elementary
School Name	Bullhead City Jr High
Building (name/number)	600 Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	600 Building
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	BC-005
Date of Collection	3.29.17
Time of Collection	5:50 am
Printed Name of Sample Collector	David Acero
Signature Sample Collector	David Acero by [Signature]

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 _____

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Name of School District	Bullhead City Elementary
School Name	Bullhead City Jr. High
Building (name/number)	600 Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Building 600
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	BC - 006
Date of Collection	3.29.17
Time of Collection	5:50 am
Printed Name of Sample Collector	David Acero
Signature Sample Collector	David Acero by Gyl Beasley

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 _____

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Name of School District	Bullhead City Elementary
School Name	Bullhead City Jr. High
Building (name/number)	700 Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	700 Building
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	BC - 007
Date of Collection	3.29.17
Time of Collection	5:55 a.m.
Printed Name of Sample Collector	David Acero
Signature Sample Collector	David Acero by Gyl Beasley

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 _____

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BULLHEAD CITY JR. HIGH SCHOOL

