

## **ANALYSIS REPORT**

Reported: 01/19/2021 Received: 01/13/2021

Sampled By:

Work Order: 1013009

**David Douglas School District** 

Attn: Troy Thompson 11300 NE Halsey St Portland OR, 97220 Phone: (503) 252-2900

C

L

ı

Ε

N

Tel.: (503) 639-9311 Fax: (503) 684-1588

**Project:**Project #: N/A
Sample Type:

Sampling Location:

Lab Number								
	Code	Method	Result	Units	MRL	EPA MCL*	Analysis Date/ Time	
1013009-01	Sample Name: #143 Retest 1st Draw Sampled: 12/31/20 6:24 Sample Composition: 1st Draw					<b>Matrix:</b> Water		
† <i>Lead</i>	1030	EPA 200.9	ND	ppb	2	15 ppb	01/15/21 11:58	
1013009-02	Sample Name: #143 Retest 2nd Draw Sampled: 12/31/20 6:25 Sample Composition: 2nd Draw				Matrix: Water			
† <i>Lead</i>	1030	EPA 200.9	ND	ppb	2	15 ppb	01/15/21 11:58	

**ND** = None detected at the MRL **MRL** = Minimum Reporting Limit †All procedures for this analysis are in accordance with NELAP standards.

**MCL** = Maximum Contamination Limit

Approved by:

Adriana Gonzalez-Gray Laboratory Director

<sup>\*</sup> The EPA MCL for Lead in Public Drinking Water Systems is 15 ppb; this is a maximum contamination level for lead in samples, this is not an acceptance level for health based exposure.



Professional Laboratory Services

## Chain of Cuswody Record

Laboratory Job Number: 1013009101-02

Page \_\_\_\_of \_\_\_

Relinquished By (print): ax or email: troy-thompson@ddsd40.org 3035 SW Pacific Hwy Tigard, OR 97223 hese samples were collected The most current revision of SOP-10-003 was used when send results to OR State Health Division? (Please circle) ampled By: ampling Location: ddress: 11300 NE Halsey St ompany/Client Name: David Douglas S.D. Relinquished By (print): hone: (503) 519-5244 ity/State/Zip: Portland OR 97222 lent Contact Information TATES ACTOST NH = North High School Sample >= " taucat # 143 Retest 1st Dray David Douglas 5040 Please enter a unique ID per line for each Date separate sample Company: Company: 0 2: 9 70500 m ph: 503,639,9311 fax: 503,684,1588 email:mall@alexinlabs.com 599 12/31/2026 Date/Time: Date/Time; City/State/Zip: Mailing Address: same Project Manager: Results Reporting Information fax or email: phone: Project Name: 1431/202s Collected Signature: Signature: 12/31/2020 Yes Z<sub>o</sub> SAMPLING Collected Time (Bagin-End If comp.) 6,2507 6:24A2 INFORMATION Received By: Matrix\* Sample cont. Project #: P:0. #: lead Analysis Requested\*\* Company; City/State/Zip: Accounts Payable Contact: Company: Mailing Address; same rax or email: invoicing Information Date/Time: Date/Time Sample Specific Notes/Field Data

C Sample Specific Notes/Field Data

for each WW sample, specify <u>Grab</u> / <u>Composite</u>

for each DW sample, specify <u>Raw</u> / <u>I</u>reated,

LLI <u>Source</u> / <u>Distribution</u>, <u>Single</u> / <u>Combined</u>

WHERE APPLICABLE for each WW sample, specify Grab / Composite Source / Distribution, Single / Combined Permit #: PWSID #: Signature

subcontracted out to other accredited laboratories.

Analyses for SOC, Radierfuclide, Radon, and Asbestos are

sludge, soll, solld, source water (SOURCE), spring, stormwater (SW), surface water, wastewater (WW), well water (WELL) Drinking water (DW), effluent (EFF), ground water (GW), influent (INF), non-aqueous liquid (NAL), paint chips, raw water (RW),