



LABORATORY RESULTS

Results are only for the samples and analytes requested.
 The lab is not directly responsible for the integrity of the sample before receipt at the lab and is responsible only for the tests requested.

Oswego City School District

**120 East First Street
 Oswego, NY 13126**

Attn To : David Chrisafulli

Collected : 8/28/2016 1:20:00 PM

Received : 8/30/2016

Collected By JM03

Lab No. : 1608Q94-001
Client Sample ID: ROOM 136/3 BAY SINK EAST/R

HIGH SCHOOL

Sample Information:

Type : Potable Water

Origin: Distribution

Analytical Method: E200.8 : IOC

Analyst: CM

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Analyzed:</u>	<u>Container:</u>
Lead	* 17	*	1	ug/L	08/30/2016 12:18 PM	Container-01 of 01

Qualifiers: E = Value above quantitation range, Value estimated.

B = Found in Blank

D.F. = Dilution Factor D = Results for Dilution

c = Calibration acceptability criteria exceeded for this analyte. Value estimated

H = Received/analyzed outside of analytical holding time

J = Estimated value - below calibration range

M-, M+ = Matrix Spike recovery below / above control limit

N = Indicates presumptive evidence of compound

P = Duplicate RPD outside of control limit

r = Reporting limit below calibration range. Value estimated.

S = Recovery outside of control limits for this analyte

+ = NYSDOH ELAP does not offer certification for this analyte / matrix / method

Date Reported : 8/31/2016

Project Manager : Elizabeth Harrison

Test results meet the requirements of NELAC unless otherwise noted.

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Attn To : David Chrisafulli

Collected : 8/28/2016 1:20:00 PM

Received : 8/30/2016

Collected By JM03

Lab No. : 1608Q94-002
 Client Sample ID: ROOM 136/3 BAY SINK EAST/F

HIGH SCHOOL

Sample Information:

Type : Potable Water

Origin: Distribution

Analytical Method: E200.8 : IOC

Analyst: CM

Parameter(s)	Results	Qualifier	D.F.	Units	Analyzed:	Container:
Lead	< 1.0		1	ug/L	08/30/2016 12:21 PM	Container-01 of 01

Qualifiers: E = Value above quantitation range, Value estimated.

B = Found in Blank

D.F. = Dilution Factor D = Results for Dilution

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H = Received/analyzed outside of analytical holding time

J = Estimated value - below calibration range

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Oswego City School District

120 East First Street
 Oswego, NY 13126

Attn To : David Chrisafulli

Collected : 8/29/2016 1:22:00 PM

Received : 8/30/2016

Collected By JM03

Lab No. : 1608Q94-003
 Client Sample ID: ROOM 136/3 BAY SINK WEST/R

HIGH SCHOOL

Sample Information:

Type : Potable Water

Origin: Distribution

Analytical Method: E200.8 : IOC

Analyst: CM

Parameter(s)	Results	Qualifier	D.F.	Units	Analyzed:	Container:
Lead	12		1	ug/L	08/30/2016 12:24 PM	Container-01 of 01

Qualifiers: E = Value above quantitation range, Value estimated.

B = Found in Blank

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c = Calibration acceptability criteria exceeded for this analyte. Value estimated

H = Received/analyzed outside of analytical holding time

J = Estimated value - below calibration range

M-, M+ = Matrix Spike recovery below / above control limit

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P = Duplicate RPD outside of control limit

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Oswego City School District

120 East First Street
 Oswego, NY 13126

Attn To : David Chrisafulli

Collected : 8/29/2016 1:22:00 PM

Received : 8/30/2016

Collected By JM03

Lab No. : 1608Q94-004
 Client Sample ID: ROOM 136/3 BAY SINK WEST/F

HIGH SCHOOL

Sample Information:

Type : Potable Water

Origin: Distribution

Analytical Method: E200.8 : IOC

Analyst: CM

Parameter(s)	Results	Qualifier	D.F.	Units	Analyzed:	Container:
Lead	< 1.0		1	ug/L	08/30/2016 12:27 PM	Container-01 of 01

Qualifiers: E = Value above quantitation range, Value estimated.

B = Found in Blank

D.F. = Dilution Factor D = Results for Dilution

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H = Received/analyzed outside of analytical holding time

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PACE ANALYTICAL
 575 Broad Hollow Road
 Melville, NY 11747
 TEL: (631) 694-3040 FAX: (631) 420-8436
 Website: www.pacelabs.com

QC SUMMARY REPORT

WO#: 1608Q94
 31-Aug-16

Client: Oswego City School District
Project: RILEY ELEMENTARY

BatchID: R104715

Sample ID	CalBlank	SampType: MBLK	TestCode: 200.8_DW_R	Units: ug/L	Prep Date:	RunNo: 104715
Client ID:	PBW	Batch ID: R104715	TestNo: E200.8	Analysis Date: 8/30/2016	SeqNo: 2317248	
Analyte		Result	PQL	SPK value	SPK Ref Val	%REC LowLimit HighLimit RPD Ref Val %RPD RPDLimit Qual
Lead		< 1.0	1.0			

Qualifiers:

*	Value exceeds Maximum Contaminant Level	D	Dilution was required.	E	Value above quantitation range
H	Holding times for preparation or analysis exceeded	M	Manual Integration used to determine area response	ND	Not Detected at the Reporting Limit
O	RSD is greater than RSDlimit	P	Second column confirmation exceeds	R	RPD outside accepted recovery limits
S	Spike Recovery outside accepted recovery limits	W	Sample container temperature is out of limit as specified		



PACE ANALYTICAL
 575 Broad Hollow Road
 Melville, NY 11747
 TEL: (631) 694-3040 FAX: (631) 420-8436
 Website: www.pacelabs.com

Sample Receipt Checklist

Client Name **CITI**

Date and Time Received: **8/30/2016**

Work Order Number: **1608Q94**

RcptNo: **1**

Received by **Linda Siciliano**

Completed by:

Reviewed by:

Completed Date: 8/30/2016 12:06:56 PM

Reviewed Date: 8/31/2016 6:48:58 PM

Carrier name: FedEx

- Chain of custody present? Yes No
- Chain of custody signed when relinquished and received? Yes No
- Chain of custody agrees with sample labels? Yes No
- Are matrices correctly identified on Chain of custody? Yes No
- Is it clear what analyses were requested? Yes No
- Custody seals intact on sample bottles? Yes No Not Present
- Samples in proper container/bottle? Yes No
- Were correct preservatives used and noted? Yes No NA
- Preservative added to bottles:
- Sample Condition? Intact Broken Leaking
- Sufficient sample volume for indicated test? Yes No
- Were container labels complete (ID, Pres, Date)? Yes No
- All samples received within holding time? Yes No
- Was an attempt made to cool the samples? Yes No NA
- All samples received at a temp. of > 0° C to 6.0° C? Yes No NA
- Response when temperature is outside of range:
- Sample Temp. taken and recorded upon receipt? Yes No To 1.8 °
- Water - Were bubbles absent in VOC vials? Yes No No Vials
- Water - Was there Chlorine Present? Yes No NA
- Water - pH acceptable upon receipt? Yes No No Water
- Are Samples considered acceptable? Yes No
- Custody Seals present? Yes No
- Airbill or Sticker? Air Bil Sticker Not Present
- Airbill No: 777106821284

Case Number:

SDG:

SAS:

Any No response should be detailed in the comments section below, if applicable.

Client Contacted? Yes No NA Person Contacted:

Contact Mode: Phone: Fax: Email: In Person:

Client Instructions:

Date Contacted: Contacted By:

Regarding:

Comments:

CorrectiveAction:

WorkOrder :
1608Q94

Certifications

STATE	CERTIFICATION #
NEW YORK	10478
NEW JERSEY	NY158
CONNECTICUT	PH-0435
MARYLAND	208
MAS S ACHUS E TTS	M-NY026
NE W HAMP S HIRE	2987
RHODE IS LAND	LAO00340
PE NNS YLVANIA	68-00350

CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.



Section A

Section B

Section C

Invoice Information:

Company: OSIEGO CSD
Address:
Report To:
Copy To:
Company Name:
Address:
Project Name: HIGH SCHOOL
Project Number:
Requested Due Date/TAT: 24 HRS
Project Order No.:
Project Name: HIGH SCHOOL
Project Number:
Matrix Code: (see valid codes to left)
Matrix Code: (see valid codes to left)
Matrix Code: (see valid codes to left)
Matrix Code: (see valid codes to left)

Section C

Invoice Information:

Page: 1 of 1
1882927
REGULATORY AGENCY
 NPDES GROUND WATER DRINKING WATER
 UST RCRA OTHER
Site Location
STATE:

ITEM #	Section D Required Client Information	Matrix Codes MATRIX / CODE	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED		SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives	Analysis Test ↑ Y/N	Requested Analysis Filtered (Y/N)	Temp in °C	Received on Ice (Y/N)	Custody Sealed (Y/N)	Samples Intact (Y/N)
				COMPOSITE START	COMPOSITE END/GRAB									
1	ROOM 136/3 BAY SINK - EAST / R	DW WT WW P SL OL WP AR TS OT	DH G	8/29	13:20		1	HCl HNO ₃ H ₂ SO ₄ Unpreserved						
2	ROOM 136/3 BAY SINK - EAST / F		DH G	8/29	13:20		1							
3	ROOM 136/3 BAY SINK - WEST / R		DH G	8/29	13:22		1							
4	ROOM 136/3 BAY SINK - WEST / F		DH G	8/29	13:22		1							
5														
6														
7														
8														
9														
10														
11														
12														

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS
RUN ALL SAMPLES	J. Murphy PACE	8/29/16	17:00	J. Murphy PACE	8/30/16	10:00	Y Y Y

SAMPLER NAME AND SIGNATURE
PRINT Name of SAMPLER: James Murray PACE
SIGNATURE of SAMPLER: [Signature]
DATE Signed (MM/DD/YYYY): 8/23/16

777 0688 1284

*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.