MICROBAC<sup>®</sup>

## Microbac Laboratories, Inc., New York Division

## CERTIFICATE OF ANALYSIS

## J7I0459

Cortland City School District	Project Name: Lead Analysis
Bob Martin	Project / PO Number: N/A
1 Valley View Drive	Received: 09/06/2017 13:31
Cortland, NY 13045	Reported: 09/20/2017 09:03

Client Sample ID:	B-79 DF (Restest)					Col	lected By:	NH-Client	
Lab Sample ID:	J710459-01						lection Date:	09/06/17	
Sample Type:	Grab						lection Time:	13:20	
Lead and/or Copper,	Total - ICP/MS Result		AL	PQL	Units	Note	Prepared	Analyzed	Lab
Method: EPA 200.8, R	v 5.4								
Lead	0.0296	0.	0150	0.000500	mg/L	G	09/07/17 1235	09/08/17 1321	NY
Laboratory									
NY:	Microbac Laboratories, Inc., New Y	ork Divisi	on						
Definitions									
AL:	US EPA Action Level								
RL:	Reporting Limit								
G:	Result fails applicable NYS drinking	g water st	tandards	3					
Cooler Receipt Log	9								
Cooler ID:	Default Cooler	Temp:	21.3%	C					
Cooler Inspection	Checklist								
Custody Seals In	tact and/or No Evidence of Tampering	I	١	/es Co	ntainers Intact				Yes
COC/Labels Agre	ee		١	es Pre	eservation Corre	ect (or no	t required)		Yes
Received on Ice	(or not required)		١	/es					
Project Requested	Certification(s)								
Microbac Laborat	ories, Inc., New York Division								
NY Lab ID N	o.: 10795			New York	State Departme	ent of Hea	alth		

## **Report Comments**

Samples were received in proper condition and the reported results conform to applicable accreditation standard unless otherwise noted.

Go Green: Contact Alayna Dawson to set up email reporting and invoicing options.

Reviewed and Approved By:

Alayna Dawson Administrative Assistant 09/20/2017 09:03

The data and information on this, and other accompanying documents, represents only the sample(s) analyzed. This report is incomplete unless all pages indicated in the footnote are present and an authorized signature is included. For any feedback concerning our services, please contact Alayna Dawson, Project Manager at alayna.dawson@microbac.com. You may also contact Christine Pechacek, Laboratory Director at christine.pechacek@microbac.com or Robert Crookston, President at robert.crookston@microbac.com.

Microbac Laboratories, Inc.

3821 Buck Drive Cortland NY 13045 Phone:(607)753-3405 Fax(807)753-3415	Microbac Laboratories, Inc.	Samples must be returned on ice
	AIN UF CUSIODY	MNY Workorder #
Client Information Billing/Invoice:	Analysis Requested	Receiving Info (Lab Use Only)
Name: Bally CTRMENTSLy Ke Ithure Schouls Address: 1 15 1101 - 1200 - DULLE		Ice: YES NO
Hand, Mr 1245		Temp:
Contact: Neg/ fe/m/		Cooler Seal: YES NO
67-345-547		<u>C</u> .12
peal		Pickup: YES NO
PO#:		Dropoff: C W
<2 2-5 5-7 7-10 Date Req.:		k
1 1 1		Accepted? YES NO
::		Container Material
		Container Size(in MI)
		Preserv
VLocation Date Time Initial	Number of Containers for Analysis Requested	sted Comments/F)
1 19-79 UF refert glolin 132 NH OW 1		
2		
		J.
4		7104
		459
2		
0		
2		
0		
Print Name and Company Signature	Date/Time	Comments
Sampled: N/eg/feling for thend Elicels new Klin	rulee. 1 (1)	***PLACE ALL SAMPLES IN BAGS WITH ICE. ***
Received: Caylor Ulitchison Cayleo	9/10/17 1331	
Received:		
Microbac Laboratories (MNY) may be unable to perform a portion of the requested testing in which case we will subcontract the analysis to another accredited laboratory.	tested testing in which case we will subcontract the	analysis to another accredited laboratory.
By signing this document you are attesting that you have been inf	ormed by MNY of the intent to subcontract and are	in agreement with this action.

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