



Microbac Laboratories, Inc., New York Division

CERTIFICATE OF ANALYSIS

J7D0955

Homer Central Schools

Project Name: Drinking Water Lead

Scott Cavellier
P.O. Box 500
Homer, NY 13077-0500

Project / PO Number: Intern. School
Received: 04/13/2017
Reported: 04/20/2017

Analytical Testing Parameters

Table with client sample details: Client Sample ID: Room 142 Sink 17, Sample Matrix: Drinking Water, Lab Sample ID: J7D0955-01, Collected By: KN-Client, Collection Date: 04/13/2017 7:22

Table with test results: Lead and/or Copper, Total - ICP/MS, Result: 0.00627, RL: 0.000500, Units: mg/L, Prepared: 04/18/17 1046, Analyzed: 04/18/17 1845, Lab: NY

Table with client sample details: Client Sample ID: Boys PE Office Sink 26, Sample Matrix: Drinking Water, Lab Sample ID: J7D0955-02, Collected By: KN-Client, Collection Date: 04/13/2017 7:24

Table with test results: Lead and/or Copper, Total - ICP/MS, Result: 0.00772, RL: 0.000500, Units: mg/L, Prepared: 04/18/17 1046, Analyzed: 04/18/17 1845, Lab: NY

Table with client sample details: Client Sample ID: Fountain Near Room 230, Sample Matrix: Drinking Water, Lab Sample ID: J7D0955-03, Collected By: KN-Client, Collection Date: 04/13/2017 7:20

Table with test results: Lead and/or Copper, Total - ICP/MS, Result: 0.0111, RL: 0.000500, Units: mg/L, Prepared: 04/18/17 1153, Analyzed: 04/18/17 1845, Lab: NY

Laboratory

NY: Microbac Laboratories, Inc., New York Division

Definitions

AL: US EPA Action Level
RL: Reporting Limit

Report Comments

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

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.

Reviewed and Approved By:

Handwritten signature of Alayna Dawson

Alayna Dawson
Administrative Assistant
alayna.dawson@microbac.com
04/20/2017 10:41

Microbac Laboratories, Inc.

3821 Buck Dr. | Cortland, NY 13045 | 607-753-3403 p | www.microbac.com

Microbac Laboratories, Inc. CHAIN OF CUSTODY

Samples must be returned on ice

MINY Workorder # _____



J7D0955

Client Information		Billing/Invoice:		Analysis Requested		Receiving Info (Lab Use Only)	
Name: HOMER ESD						Ice: YES NO	YES NO
Address: 80 S. WEST RD						Cooler: YES NO	YES NO
Contact: SCOTT CAVELLIER						Sample Temp: _____	
Phone: 607-749-1234 x 1						Cooler Seal: YES NO	YES NO
Project: INTERM. SCHOOL						Pickup: YES NO	YES NO
Quote ID: _____	PO#: _____					Dropoff: G W	G W
Rush TAT Bus. Days: <2 2-5 5-7 7-10	Date Req.: _____					Accepted? YES NO	YES NO
Release to DOH: Yes						Contalther Material	
Email Results: <input checked="" type="checkbox"/> SCAVELLIER@HOMERCENTRAL.ORG						Contalther Size(In Ml)	
Fax Results: Yes						Preservative	
Sample Information		Number of Containers for Analysis Requested		Comments/Field Data			
Description/Location	Date	Time	Initial	Matrix Type			
1 ROOM 142 (17) SINK	4/13/17	7:00	KR	DW	1		
2 BOYS PE OFFICE SINK (24)	4/13/17	7:24	KR	G	1		
3 FOUNTAIN NEAR ROOM 230	4/13/17	7:00	KR	↓	1		
4							
5							
6							
7							
8							

Print Name and Company: **Kelly Weish**
 Signature: *Kelly Weish*
 Date/Time: **4/13/17 11:23**
 Received: **Donelle Gioner**
 Signature: *Donelle Gioner*
 Date/Time: **4/13/17 11:23**