

July 16, 2020

Glenn Walker PO Box  
Brunswick County Water Systems  
PO Box 249  
Bolivia, NC 28422

RE: Project: 1,4-Dx-522 (Weekly)  
Pace Project No.: 35560476

Dear Glenn PO Box:

Enclosed are the analytical results for sample(s) received by the laboratory on July 03, 2020. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Ormond Beach

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Lisa Harvey  
lisa.harvey@pacelabs.com  
(386) 672-5668  
Project Manager

Enclosures

cc: Billy Benton, BRUNSWICK COUNTY PUBLIC UTILITIES



## REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,  
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## CERTIFICATIONS

Project: 1,4-Dx-522 (Weekly)

Pace Project No.: 35560476

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### **Pace Analytical Services Ormond Beach**

8 East Tower Circle, Ormond Beach, FL 32174

Alaska DEC- CS/UST/LUST

Alabama Certification #: 41320

Arizona Certification# AZ0819

Colorado Certification: FL NELAC Reciprocity

Connecticut Certification #: PH-0216

Delaware Certification: FL NELAC Reciprocity

Florida Certification #: E83079

Georgia Certification #: 955

Guam Certification: FL NELAC Reciprocity

Hawaii Certification: FL NELAC Reciprocity

Illinois Certification #: 200068

Indiana Certification: FL NELAC Reciprocity

Kansas Certification #: E-10383

Kentucky Certification #: 90050

Louisiana Certification #: FL NELAC Reciprocity

Louisiana Environmental Certificate #: 05007

Maryland Certification: #346

Michigan Certification #: 9911

Mississippi Certification: FL NELAC Reciprocity

Missouri Certification #: 236

Montana Certification #: Cert 0074

Nebraska Certification: NE-OS-28-14

New Hampshire Certification #: 2958

New Jersey Certification #: FL022

New York Certification #: 11608

North Carolina Environmental Certificate #: 667

North Carolina Certification #: 12710

North Dakota Certification #: R-216

Ohio DEP 87780

Oklahoma Certification #: D9947

Pennsylvania Certification #: 68-00547

Puerto Rico Certification #: FL01264

South Carolina Certification: #96042001

Tennessee Certification #: TN02974

Texas Certification: FL NELAC Reciprocity

US Virgin Islands Certification: FL NELAC Reciprocity

Virginia Environmental Certification #: 460165

West Virginia Certification #: 9962C

Wisconsin Certification #: 399079670

Wyoming (EPA Region 8): FL NELAC Reciprocity

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## REPORT OF LABORATORY ANALYSIS

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## SAMPLE SUMMARY

Project: 1,4-Dx-522 (Weekly)

Pace Project No.: 35560476

| Lab ID      | Sample ID  | Matrix         | Date Collected | Date Received  |
|-------------|------------|----------------|----------------|----------------|
| 35560476001 | 070220-S01 | Drinking Water | 07/01/20 07:15 | 07/03/20 10:00 |
| 35560476002 | 070220-E02 | Drinking Water | 07/01/20 07:15 | 07/03/20 10:00 |

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## SAMPLE ANALYTE COUNT

Project: 1,4-Dx-522 (Weekly)

Pace Project No.: 35560476

| Lab ID      | Sample ID  | Method  | Analysts | Analytes Reported | Laboratory |
|-------------|------------|---------|----------|-------------------|------------|
| 35560476001 | 070220-S01 | EPA 522 | TM2      | 2                 | PASI-O     |
| 35560476002 | 070220-E02 | EPA 522 | TM2      | 2                 | PASI-O     |

PASI-O = Pace Analytical Services - Ormond Beach

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## ANALYTICAL RESULTS

Project: 1,4-Dx-522 (Weekly)

Pace Project No.: 35560476

| <b>Sample: 070220-S01</b>  |             | <b>Lab ID: 35560476001</b>                                                                        |        | Collected: 07/01/20 07:15 |    | Received: 07/03/20 10:00 |                | Matrix: Drinking Water |      |
|----------------------------|-------------|---------------------------------------------------------------------------------------------------|--------|---------------------------|----|--------------------------|----------------|------------------------|------|
| Parameters                 | Results     | Units                                                                                             | PQL    | MDL                       | DF | Prepared                 | Analyzed       | CAS No.                | Qual |
| <b>522 MSS 1,4 Dioxane</b> |             | Analytical Method: EPA 522 Preparation Method: EPA 522<br>Pace Analytical Services - Ormond Beach |        |                           |    |                          |                |                        |      |
| 1,4-Dioxane (p-Dioxane)    | <b>0.30</b> | ug/L                                                                                              | 0.20   | 0.12                      | 1  | 07/14/20 16:15           | 07/15/20 12:00 | 123-91-1               |      |
| <b>Surrogates</b>          |             |                                                                                                   |        |                           |    |                          |                |                        |      |
| 1,4-Dioxane-d8 (S)         | 86          | %                                                                                                 | 70-130 |                           | 1  | 07/14/20 16:15           | 07/15/20 12:00 |                        |      |

| <b>Sample: 070220-E02</b>  |             | <b>Lab ID: 35560476002</b>                                                                        |        | Collected: 07/01/20 07:15 |    | Received: 07/03/20 10:00 |                | Matrix: Drinking Water |      |
|----------------------------|-------------|---------------------------------------------------------------------------------------------------|--------|---------------------------|----|--------------------------|----------------|------------------------|------|
| Parameters                 | Results     | Units                                                                                             | PQL    | MDL                       | DF | Prepared                 | Analyzed       | CAS No.                | Qual |
| <b>522 MSS 1,4 Dioxane</b> |             | Analytical Method: EPA 522 Preparation Method: EPA 522<br>Pace Analytical Services - Ormond Beach |        |                           |    |                          |                |                        |      |
| 1,4-Dioxane (p-Dioxane)    | <b>0.26</b> | ug/L                                                                                              | 0.20   | 0.12                      | 1  | 07/14/20 16:15           | 07/15/20 12:49 | 123-91-1               |      |
| <b>Surrogates</b>          |             |                                                                                                   |        |                           |    |                          |                |                        |      |
| 1,4-Dioxane-d8 (S)         | 89          | %                                                                                                 | 70-130 |                           | 1  | 07/14/20 16:15           | 07/15/20 12:49 |                        |      |

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## QUALITY CONTROL DATA

Project: 1,4-Dx-522 (Weekly)

Pace Project No.: 35560476

|                  |         |                       |                                         |
|------------------|---------|-----------------------|-----------------------------------------|
| QC Batch:        | 648361  | Analysis Method:      | EPA 522                                 |
| QC Batch Method: | EPA 522 | Analysis Description: | 522 MSS 1,4 Dioxane                     |
|                  |         | Laboratory:           | Pace Analytical Services - Ormond Beach |

Associated Lab Samples: 35560476001, 35560476002

METHOD BLANK: 3524855 Matrix: Water

Associated Lab Samples: 35560476001, 35560476002

| Parameter               | Units | Blank Result | Reporting Limit | MDL  | Analyzed       | Qualifiers |
|-------------------------|-------|--------------|-----------------|------|----------------|------------|
| 1,4-Dioxane (p-Dioxane) | ug/L  | 0.12 U       | 0.20            | 0.12 | 07/15/20 11:11 |            |
| 1,4-Dioxane-d8 (S)      | %     | 95           | 70-130          |      | 07/15/20 11:11 |            |

LABORATORY CONTROL SAMPLE: 3524856

| Parameter               | Units | Spike Conc. | LCS Result | LCS % Rec | % Rec Limits | Qualifiers |
|-------------------------|-------|-------------|------------|-----------|--------------|------------|
| 1,4-Dioxane (p-Dioxane) | ug/L  | 20          | 19.2       | 96        | 70-130       |            |
| 1,4-Dioxane-d8 (S)      | %     |             |            | 100       | 70-130       |            |

LABORATORY CONTROL SAMPLE: 3524857

| Parameter               | Units | Spike Conc. | LCS Result | LCS % Rec | % Rec Limits | Qualifiers |
|-------------------------|-------|-------------|------------|-----------|--------------|------------|
| 1,4-Dioxane (p-Dioxane) | ug/L  | 0.24        | 0.20 I     | 83        | 50-150       |            |
| 1,4-Dioxane-d8 (S)      | %     |             |            | 97        | 70-130       |            |

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3524858 3524859

| Parameter               | Units | 35560476001 Result | MS Spike Conc. | MSD Spike Conc. | MS Result | MSD Result | MS % Rec | MSD % Rec | % Rec Limits | RPD | Max RPD | Qual |
|-------------------------|-------|--------------------|----------------|-----------------|-----------|------------|----------|-----------|--------------|-----|---------|------|
| 1,4-Dioxane (p-Dioxane) | ug/L  | 0.30               | 20             | 20              | 16.5      | 16.9       | 81       | 83        | 70-130       | 3   | 20      |      |
| 1,4-Dioxane-d8 (S)      | %     |                    |                |                 |           |            | 84       | 86        | 70-130       |     |         |      |

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3524860 3524861

| Parameter               | Units | 35560476002 Result | MS Spike Conc. | MSD Spike Conc. | MS Result | MSD Result | MS % Rec | MSD % Rec | % Rec Limits | RPD | Max RPD | Qual |
|-------------------------|-------|--------------------|----------------|-----------------|-----------|------------|----------|-----------|--------------|-----|---------|------|
| 1,4-Dioxane (p-Dioxane) | ug/L  | 0.26               | 20             | 20              | 17.4      | 18.5       | 86       | 91        | 70-130       | 6   | 20      |      |
| 1,4-Dioxane-d8 (S)      | %     |                    |                |                 |           |            | 90       | 97        | 70-130       |     |         |      |

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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## QUALIFIERS

Project: 1,4-Dx-522 (Weekly)

Pace Project No.: 35560476

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### DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

### ANALYTE QUALIFIERS

- |   |                                                                                                                      |
|---|----------------------------------------------------------------------------------------------------------------------|
| I | The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit. |
| U | Compound was analyzed for but not detected.                                                                          |

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## QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: 1,4-Dx-522 (Weekly)

Pace Project No.: 35560476

| Lab ID      | Sample ID  | QC Batch Method | QC Batch | Analytical Method | Analytical Batch |
|-------------|------------|-----------------|----------|-------------------|------------------|
| 35560476001 | 070220-S01 | EPA 522         | 648361   | EPA 522           | 648556           |
| 35560476002 | 070220-E02 | EPA 522         | 648361   | EPA 522           | 648556           |

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WO#: 35560476

# CHAIN-OF-CUSTODY / Analytical Request Document

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

## Section C

|                       |                                           |                       |                          |
|-----------------------|-------------------------------------------|-----------------------|--------------------------|
| Required Information: |                                           | Invoice Information:  |                          |
| Company:              | Brunswick County Water System             | Attention:            |                          |
| Address:              | 3954 Clearwell Dr. NE<br>Leland, NC 28451 | Company Name:         |                          |
| Email:                | glenn.walker@brunswickcountync.gov        | Address:              |                          |
| Phone:                | 910-371-3490                              | Pace Project Manager: | lisa.harvey@pacelabs.com |
| Requested Due Date:   |                                           | Pace Profile #:       | 9551-1                   |
| Purchase Order #:     |                                           | State / Location      |                          |
| Project Name:         |                                           | NC                    |                          |
| Project #:            |                                           | Regulatory Agency     |                          |

| ITEM # | MATRIX<br>Drinking Water<br>Water<br>Waste Water<br>Product<br>Soil/Solid<br>Oil<br>Wipe<br>Air<br>Other<br>Tissue | CODE<br>DW<br>WT<br>WW<br>P<br>SL<br>OL<br>WP<br>AR<br>OT<br>TS | MATRIX CODE (see valid codes to left) | SAMPLE TYPE (G=GRAB C=COMP) | COLLECTED |      |        |      | SAMPLE TEMP AT COLLECTION | # OF CONTAINERS | Preservatives |      |     |      |         |          |       |  | Analyses Test | Y/N | Requested Analysis Filtered (Y/N) |  |  |  |  |  |  |  |  |  |  |  | Residual Chlorine (Y/N) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
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|        |                                                                                                                    |                                                                 |                                       |                             | START     |      | END    |      |                           |                 | H2SO4         | HNO3 | HCl | NaOH | Na2S2O3 | Methanol | Other |  |               |     |                                   |  |  |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
|        |                                                                                                                    |                                                                 |                                       |                             | DATE      | TIME | DATE   | TIME |                           |                 |               |      |     |      |         |          |       |  |               |     |                                   |  |  |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |    |
| 1      |                                                                                                                    |                                                                 | 3                                     | G-GRAB                      | 7-1-10    | 0815 | 7-1-10 | 0815 | 1                         | 1               |               |      |     |      |         |          |       |  |               |     |                                   |  |  |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | </ |

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|----------------------------|--------------------|
| SAMPLER NAME AND SIGNATURE |                    |
| PRINT Name of SAMPLER:     | B. L. Benton       |
| SIGNATURE of SAMPLER:      | <i>[Signature]</i> |
| DATE Signed:               | 7-1-10             |



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Sample Condition Upon Receipt Form  
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### Sample Condition Upon Receipt Form (SCUR)

Project #  
Project Manager:  
Client:

**WO#: 35560476**  
PM: LMH Due Date: 07/15/20  
CLIENT: BRUNCOWS

Date and Initials of person:  
Examining contents: BRN  
Label:  
Deliver:  
pH:

Thermometer Used: T-329 Date: 7-5-20 Time: 1:09 Initials: SRW

State of Origin:

☐ For WV projects, all containers verified to  $\leq 6^{\circ}\text{C}$

Cooler #1 Temp.  $^{\circ}\text{C}$  3.1 (Visual) +1 (Correction Factor) 3.2 (Actual)  
Cooler #2 Temp.  $^{\circ}\text{C}$  (Visual) (Correction Factor) (Actual)  
Cooler #3 Temp.  $^{\circ}\text{C}$  (Visual) (Correction Factor) (Actual)  
Cooler #4 Temp.  $^{\circ}\text{C}$  (Visual) (Correction Factor) (Actual)  
Cooler #5 Temp.  $^{\circ}\text{C}$  (Visual) (Correction Factor) (Actual)  
Cooler #6 Temp.  $^{\circ}\text{C}$  (Visual) (Correction Factor) (Actual)

☐ Samples on ice, cooling process has begun  
☐ Samples on ice, cooling process has begun  
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Courier: ☒ Fed Ex ☐ UPS ☐ USPS ☐ Client ☐ Commercial ☐ Pace

Shipping Method: ☐ First Overnight ☐ Priority Overnight ☒ Standard Overnight ☐ Ground ☐ International Priority  
☐ Other

Billing: ☐ Recipient ☐ Sender ☒ Third Party ☐ Credit Card ☐ Unknown

Tracking # 3944 5758 6286

Custody Seal on Cooler/Box Present: ☐ Yes ☐ No Seals intact: ☐ Yes ☐ No Ice: Wet Blue Dry None

Packing Material: ☒ Bubble Wrap ☐ Bubble Bags ☐ None ☐ Other

Samples shorted to lab (If Yes, complete) Shorted Date: Shorted Time: Qty:

#### Comments:

|                                                                                            |                                                                                                  |  |
|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|--|
| Chain of Custody Present                                                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A            |  |
| Chain of Custody Filled Out                                                                | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Relinquished Signature & Sampler Name COC                                                  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Samples Arrived within Hold Time                                                           | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Rush TAT requested on COC                                                                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Sufficient Volume                                                                          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Correct Containers Used                                                                    | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Containers Intact                                                                          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Sample Labels match COC (sample IDs & date/time of collection)                             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| All containers needing acid/base preservation have been checked.                           | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| All Containers needing preservation are found to be in compliance with EPA recommendation: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |  |
| Exceptions: VOA, Coliform, TOC, O&G, Carbamates                                            |                                                                                                  |  |
| Headspace in VOA Vials? (>6mm):                                                            | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |  |
| Trip Blank Present:                                                                        | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |  |

Preservation Information:  
Preservative: \_\_\_\_\_  
Lot #/Trace #: \_\_\_\_\_  
Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Initials: \_\_\_\_\_

#### Client Notification/ Resolution:

Person Contacted: \_\_\_\_\_

Date/Time: \_\_\_\_\_

#### Comments/ Resolution (use back for additional comments):

Project Manager Review: \_\_\_\_\_

Date: \_\_\_\_\_ Page 10 of 10