



December 09, 2025

Ethan Stalter
Chatham Central School District
50 Woodbridge Ave
Chatham, NY 12037

RE: Project: CHATHAM HIGH SCHOOL 11/14
Pace Project No.: 70392522

Dear Ethan Stalter:

Enclosed are the analytical results for sample(s) received by the laboratory on November 18, 2025. 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.

Some analyses were subcontracted outside of the Pace Network. The test report from the external subcontractor is attached to this report in its entirety.

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

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

Sincerely,

Alexandria Correa
alexandria.correa@pacelabs.com
516-370-6000
Project Manager

Enclosures

cc: Michael Chudy, Chatham Central School District
Lisa Lyons, Questar III BOCES
Holly Sherman, Chatham Central School District



REPORT OF LABORATORY ANALYSIS

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WO#: 70392522



70392522

PACE LABS

Pace Labs address: 14 Walker Way, Albany, NY 12205

District Name: Chatham CSD

School Name: Chatham High School

Street address: 50 Woodbridge Ave, Chatham, NY 12037

Customer Project #

Project Name: Lead in Water testing

Site collection: Lisa Lyons 518 337 7722

Contact/Report to: Ethan Stalter and Lisa Lyons

Phone: 518-788-6264

Email: staltere@chatham.k12.ny.us lisa.lyons@questar.org

Invoice to: Holly Sherman

Email: shermanh@chatham.k12.ny.us

Purchase order #26-0085

Quote # \$14.25 per sample

County State of origin of sample: Columbia County, New York

Chain of Custody

Number	Sample ID	Chatham High School - CHS	Collection		Grab	# of Con tainers	Analysis Required
			Date	Time			
1	CHS-F-1	Main Office Kitchen Sink	11/14/2025	5:18 AM	X	1	Lead
2	CHS-DW-2	Room 147 - Womens Rm Fountain	11/14/2025	5:17 AM	X	1	Lead
3	CHS-DW-3	Corridor across from 110 Fountain Left	11/14/2025	5:16 AM	X	1	Lead
4	CHS-DW-4	Corridor across from 110 Fountain Right	11/14/2025	5:15 AM	X	1	Lead
5	CHS-DW-5	Corridor across from 110 Bottle Filler	11/14/2025	5:14 AM	X	1	Lead
6	CHS-F-6	Room 107 Health Sink	11/14/2025	5:12 AM	X	1	Lead
7	CHS-F-7	Room 156 Faculty Sink	11/14/2025	5:09 AM	X	1	Lead
8	CHS-KS-8	Kitchen Prep Sink	11/14/2025	5:02 AM	X	1	Lead
9	CHS-KS-9	Kitchen Prep Sink	11/14/2025	5:03 AM	X	1	Lead
10	CHS-KS-10	Kitchen Prep Sink	11/14/2025	5:04 AM	X	1	Lead
11	CHS-KS-11	Kitchen Prep Sink	11/14/2025	5:07 AM	X	1	Lead
12	n/a	n/a					
13	CHS-DW-13	Room 151 Custodian Fountain	11/14/2025	5:21 AM	X	1	Lead
14	CHS-DW-14	Corridor next to Rm 151 Fountain Left	11/14/2025	5:22 AM	X	1	Lead
15	CHS-DW-15	Corridor next to Rm 151 Fountain Right	11/14/2025	5:23 AM	X	1	Lead
16	CHS-DW-16	Corridor next to Rm 151 Bottle Filler	11/14/2025	5:24 AM	X	1	Lead
17	n/a	n/a					
18	CHS-DW- 18	Outside Gym Fountain Left	11/14/2025	5:26 AM	X	1	Lead
19	CHS-DW- 19	Outside Gym Fountain Right	11/14/2025	5:27 AM	X	1	Lead
20	CHS-DW- 20	Outside Gym Bottle Filler	11/14/2025	5:28 AM	X	1	Lead
21	CHS-F-21	Room 134 Nurse Sink	11/14/2025	5:42 AM	X	1	Lead
22	CHS-F-22	Room 131A Library Prep Sink	11/14/2025	5:41 AM	X	1	Lead
23	CHS-F-23	Room 123A Sink	11/14/2025	5:36 AM	X	1	Lead
24	CHS-F-24	Room 124A Sink	11/14/2025	5:39 AM	X	1	Lead
Relinquished by/Company: (Signature) <i>Lisa Lyons</i> <i>QIII</i>			Received by: Date/Time <i>NOV 17 2025</i>		Tracking Number:		
Relinquished by/Company: (Signature) <i>[Signature]</i>			Received by: Date/Time <i>NOV 17 2025</i>		Delivered by:		
Relinquished by/Company: (Signature) <i>[Signature]</i>			Received by: Date/Time <i>NOV 17 2025</i>		Page _____ of _____		

KS 11/18/25 L. Allen Day PACE LI 11/18/25 600



Pace® Location Requested (City/State):

CHAIN-OF-CUSTODY Analytical Request Document

Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields

Company Name: Chatham Central School District	Contact/Report To: Ethan Stalter
Street Address: HIGH SCHOOL 50 Woodbridge Ave. Chatham, NY 12037	Phone #: 518 788-6264
Customer Project #:	E-Mail: staltere@chatham.k12.ny.us
Project Name: Lead in Water testing	Cc E-Mail:
Site Collection Info/Facility ID (as applicable): Chatham High School H.S	Invoice to: Holly Sherman
Time Zone Collected: [] AK [] PT [] MT [] CT ☒ ET	Invoice E-mail: shermanh@chatham.k12.ny.us
	Purchase Order # (if applicable): P.O. # 26-0085
	Quote #: 14.25 per sample
	County / State origin of sample(s):

Data Deliverables:	Regulatory Program (DW, RCRA, etc.) as applicable:	Reportable [] Yes [] No
[] Level II [] Level III [] Level IV	Rush (Pre-approval required):	DW PWSID # or WW Permit # as applicable:
[] EQUIS	[] Same Day [] 1 Day [] 2 Day [] 3 Day Other _____	Field Filtered (if applicable): [] Yes [] No
[] Other _____	Date Results Requested:	Analysis:
* Matrix Codes (Insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Wastewater (WW), Product (P), Soil/Solid (SS), Oil (OL), Wipe (WP), Tissue (TS), Bioassay (B), Vapor (V), Surface Water (SW), Sediment (SED), Sludge (SL), Caulk (CK), Leachate (LL), Biosolid (BS), Other (OT)		

Customer Sample ID	Matrix *	Comp / Grab	Composite Start		Collected or Composite End		# Cont.	Residual Chlorine	
			Date	Time	Date	Time		Result	Units
CHS-F-1 (Main Office)			_____	_____	5:18	1			
CHS-DW-2 (outside rm 147)			_____	_____	5:17	2			
CHS-DW-3 (Corridor Rm 110 LEFT)			_____	_____	5:16	3			
CHS-DW-4 (Corridor Rm 110 RIGHT)			_____	_____	5:15	4			
CHS-DW-5 (Corridor Rm 110 Bottle Filler)			_____	_____	5:14	5			
CHS-F-6 (Rm 107 Health)			_____	_____	5:12	6			
CHS-F-7 (Room 156 FACULTY)			_____	_____	5:09	7			
CHS-KS-8 (BACK WALL RIGHT)			_____	_____	5:02	8			
CHS-KS-9 (BACK WALL CENTER)			_____	_____	5:03	9			
CHS-KS-10 (BACK WALL LEFT)			_____	_____	5:04	10			

Additional Instructions from Pace®:

Collected By:
Printed Name
Signature

Customer Remarks / Special Conditions / Possible Hazards:

Coolers: Thermometer ID: Correction Factor (°C): Obs. Temp. (°C): Corrected Temp. (°C): [] On Ice

Relinquished by/Company: (Signature)	Date/Time:	Received by/Company: (Signature)	Date/Time:	Tracking Number:
Relinquished by/Company: (Signature)	Date/Time:	Received by/Company: (Signature)	Date/Time:	Delivered by: [] In-Person [] Courier
Relinquished by/Company: (Signature)	Date/Time:	Received by/Company: (Signature)	Date/Time:	[] FedEx [] UPS [] Other
Relinquished by/Company: (Signature)	Date/Time:	Received by/Company: (Signature)	Date/Time:	Page: 1 of 3

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace® Terms and Conditions found at <https://www.pacelabs.com/resource-library/resource/pace-terms-and-conditions/>

ENV-FRM-CORQ-0019_v02_110123 ©

LAB USE ONLY- Affix Workorder/Login Label Here



Scan QR Code for instructions

Specify Container Size **

** Container Size: (1) 1L, (2) 500mL, (3) 250mL, (4) 125mL, (5) 100mL, (6) 40mL vial, (7) EnCore, (8) TerraCore, (9) 90mL, (10) Other

Identify Container Preservative Type***

*** Preservative Types: (1) None, (2) HNO3, (3) H2SO4, (4) HCl, (5) NaOH, (6) Zn Acetate, (7) NaHSO4, (8) Sod. Thiosulfate, (9) Ascorbic Acid, (10) MeOH, (11) Other

Analysis Requested

Proj. Mgr:

AcctNum / Client ID:

Table #:

Profile / Template:

Prelog / Bottle Ord. ID:

Sample Comment

Preservation non-conformance identified for sample.

Pace® Location Requested (City/State): CHATHAM		CHAIN-OF-CUSTODY Analytical Request Document Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields		LAB USE ONLY- Affix Workorder/Login Label Here Scan QR Code for instructions									
Company Name: Chatham Central School District		Contact/Report To: Ethan Stalter		Street Address: 50 Woodbridge Ave Chatham, NY 12037 Phone #: 518 788-6264 E-Mail: staltere@chatham.k12.ny.us Cc E-Mail:									
Customer Project #:		Invoice to: Holly Sherman											
Project Name: Lead in water testing		Invoice E-mail: shermanh@chatham.k12.ny.us											
Site Collection Info/Facility ID (as applicable): Chatham High School H.S		Purchase Order # (if applicable): P.O. # 26-0085 Quote #: 14.25 per sample											
Time Zone Collected: ☐ AK ☐ PT ☐ MT ☐ CT ☒ ET		County / State origin of sample(s):		Specify Container Size **									
Data Deliverables:		Regulatory Program (DW, RCRA, etc.) as applicable:		Identify Container Preservative Type***									
☐ Level II ☐ Level III ☐ Level IV ☐ EQUIS ☐ Other:		Rush (Pre-approval required): ☐ Same Day ☐ 1 Day ☐ 2 Day ☐ 3 Day Other:		*** Container Size: (1) 1L, (2) 500mL, (3) 250mL, (4) 125mL, (5) 100mL, (6) 40mL vial, (7) EnCore, (8) TerraCore, (9) 90mL, (10) Other									
Requested:		DW PWSID # or WW Permit # as applicable:		*** Preservative Types: (1) None, (2) HNO3, (3) H2SO4, (4) HCl, (5) NaOH, (6) Zn Acetate, (7) NaHSO4, (8) Sod. Thiosulfate, (9) Ascorbic Acid, (10) MeOH, (11) Other									
Field Filtered (if applicable): ☐ Yes ☐ No		Analysis:		Analysis Requested									
* Matrix Codes (Insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Wastewater (WW), Product (P), Soil/Solid (SS), Oil (OL), Wipe (WP), Tissue (TS), Bioassay (B), Vapor (V), Surface Water (SW), Sediment (SED), Sludge (SL), Caulk (CK), Leachate (LL), Biosolid (BS), Other (OT)													
Customer Sample ID		Matrix *	Comp / Grab	Composite Start		Collected or Composite End		# Cont.	Residual Chlorine		Lab Use Only Proj. Mgr: AcctNum / Client ID: Table #: Profile / Template: Prelog / Bottle Ord. ID: Preservation non-conformance identified for sample.		
				Date Time		Date Time			Result Units				
CHS-KS-11 (Prep across from stove)				_____		5:07		11					
CHS-KV-12 (Steamer VALVE)				_____				12					
CHS-DW-13 (RM 151 custodian)				_____		5:21		13					
CHS-DW-14 (outside Rm 151)				_____		5:22		14					
CHS-DW-15 (outside Rm 151 Right)				_____		5:23		15					
CHS-DW-16 (outside Rm 151 Bottle fil)				_____		5:24		16					
CHS-IM-17 (Rm 141)				_____		5:25		17					
CHS-DW-18 (outside GYM Left)				_____		5:26		18					
CHS-DW-19 (outside GYM RIGHT)				_____		5:27		19					
CHS-DW-20 (outside GYM Bottle Filler)				_____		5:28		20					
Additional Instructions from Pace®:				Collected By: Printed Name Signature		Customer Remarks / Special Conditions / Possible Hazards:							
Relinquished by/Company: (Signature)				Date/Time:		Received by/Company: (Signature)				Date/Time:		Tracking Number:	
Relinquished by/Company: (Signature)				Date/Time:		Received by/Company: (Signature)				Date/Time:		Delivered by: ☐ In-Person ☐ Courier	
Relinquished by/Company: (Signature)				Date/Time:		Received by/Company: (Signature)				Date/Time:		☐ FedEx ☐ UPS ☐ Other	
Relinquished by/Company: (Signature)				Date/Time:		Received by/Company: (Signature)				Date/Time:		Page: 2 of 3	

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace® Terms and Conditions found at <https://www.pacelabs.com/resource-library/resource/pace-terms-and-conditions/>

ENV-FRM-CORQ-0019_v02_110123 ©

WO#: 70392522

PM: ALC

Due Date: 12/04/25

CLIENT: CCSD_QIII

Client Name:

CCSD-QIII

Project #

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client ☐ Commercial ☐ Pace ☐ Other

Tracking #:

Custody Seal on Cooler/Box Present: ☐ Yes ☒ No Seals intact: ☐ Yes ☐ No Temperature Blank Present: ☐ Yes ☒ No

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ Ziploc ☐ None ☐ Other Type of Ice: Wet Blue None

Thermometer Used: THQ11 Correction Factor: +1 ☐ Samples on ice, cooling process has begun

Cooler Temperature(°C): 19.1 Cooler Temperature Corrected(°C): 19.2 Date/Time 5035A kits placed in freezer

Temp should be above freezing to 6.0°C

USDA Regulated Soil (☒ N/A, water sample)

Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX, or VA (check map)? ☐ Yes ☐ No

Did samples originate from a foreign source including Hawaii and Puerto Rico)? ☐ Yes ☐ No

If Yes to either question, fill out a Regulated Soil Checklist (ENV-FRM-MELV-0076) and include with SCUR/COC paperwork.

Date and Initials of person examining contents:

AD 11/20/25

	COMMENTS:
Chain of Custody Present: ☒ Yes ☐ No	1.
Chain of Custody Filled Out: ☒ Yes ☐ No	2.
Chain of Custody Relinquished: ☒ Yes ☐ No	3.
Sampler Name & Signature on COC: ☒ Yes ☐ No ☐ N/A	4.
Samples Arrived within Hold Time: ☒ Yes ☐ No	5.
Short Hold Time Analysis (<72hr): ☐ Yes ☒ No	6.
Rush Turn Around Time Requested: ☐ Yes ☒ No	7.
Sufficient Volume: (Triple volume provided for MS/MSD) ☒ Yes ☐ No	8.
Correct Containers Used: ☒ Yes ☐ No	9.
-Pace Containers Used: ☒ Yes ☐ No	10.
Containers Intact: ☒ Yes ☐ No	11.
Filtered volume received for Dissolved tests ☐ Yes ☐ No ☒ N/A	Note: if sediment is visible in the dissolved container.
Sample Labels match COC: ☒ Yes ☐ No	12.
-Includes date/time/ID/Analysis Matrix: SL <u>(WT)</u> OIL OTHER	

Date and Initials of person checking preservation:

AD 11/20/25

All containers needing preservation have been ☒ Yes ☐ No ☐ N/A	13. ☐ HNO ₃ ☐ H ₂ SO ₄ ☐ NaOH ☐ HCl
pH paper Lot # <u>210525</u>	Sample #
All containers needing preservation are found to be in compliance with method recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH>9 Sulfide, ☒ Yes ☐ No ☐ N/A	
Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water).	
Per Method, VOA pH is checked after analysis	Initial when completed: Lot # of added preservative: Date/Time preservative added:
Samples checked for dechlorination: ☐ Yes ☐ No ☒ N/A	14.
KI starch test strips Lot #	Positive for Res. Chlorine? Y N
Residual chlorine strips Lot #	15.
SM 4500 CN samples checked for sulf ☐ Yes ☐ No ☒ N/A	Positive for Sulfide? Y N
Lead Acetate Strips Lot #	16.
Headspace in ALK Bottle (>6mm): ☐ Yes ☐ No ☒ N/A	17.
Headspace in VOA Vials (>6mm): ☐ Yes ☐ No ☒ N/A	
Trip Blank Present: ☐ Yes ☐ No ☒ N/A	
Trip Blank Custody Seals Present ☐ Yes ☐ No ☒ N/A	

Client Notification/ Resolution:

Field Data Required? Y / N

Person Contacted:

Date/Time:

Comments/ Resolution:

* PM (Project Manager) review (which includes the SCUR) is documented electronically in LIMS.

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

CERTIFICATE OF ANALYSIS

Brianna Rivera

**Pace Analytical Services, LLC Melville,
NY
575 Broadhollow Rd
Melville, NY 11747**

Project Name and Number: **Chatham High School 11/14**

Workorder: **25K1936**

Purchase Order: **70392522**

December 08, 2025

This report relates only to the sample(s) as received by the laboratory on November 24, 2025. Laboratory reports may not be reproduced, except in full, without the written approval of the laboratory.

The issuance of the final Certificate of Analysis takes precedence over any previous Preliminary Report. Caution is advised for the utilization of preliminary data included in reports labeled as "Preliminary Report" and should not be used for regulatory purposes. A laboratory signature is provided on final reports only.

If you have any questions in reference to this laboratory report, please contact your Pace Analytical Services, LLC-Fairfield project coordinator.

Note: This cover page is included as part of the Analytical Report and must be retained as a permanent record thereof.



Timothy Swavely For Mary Ellen Nealy, Project
Coordinator

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-01 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:18
Sample ID: CHS-F-1 (70392522001) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.0114		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:30	12/01/2025 13:30	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-02 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:17
Sample ID: CHS-DW-2 (70392522002) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00241		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:32	12/01/2025 13:32	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-03 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:16
Sample ID: CHS-DW-3 (70392522003) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00768		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:35	12/01/2025 13:35	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-04 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:15
Sample ID: CHS-DW-4 (70392522004) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:37	12/01/2025 13:37	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-05 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:14
Sample ID: CHS-DW-5 (70392522005) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:44	12/01/2025 13:44	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-06 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:12
Sample ID: CHS-F-6 (70392522006) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00803		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:47	12/01/2025 13:47	1

Pace Analytical Services, LLC-Fairfield
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(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-07 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:09
Sample ID: CHS-F-7 (70392522007) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00526		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:49	12/01/2025 13:49	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-08 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:02
Sample ID: CHS-KS-8 (70392522008) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:51	12/01/2025 13:51	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-09 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:03
Sample ID: CHS-KS-9 (70392522009) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:54	12/01/2025 13:54	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-10 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:04
Sample ID: CHS-KS-10 (70392522010) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:56	12/01/2025 13:56	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-11 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:07
Sample ID: CHS-KS-11 (70392522011) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 13:58	12/01/2025 13:58	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-12 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:21
Sample ID: CHS-DW-13 (70392522012) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:01	12/01/2025 14:01	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-13 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:22
Sample ID: CHS-DW-14 (70392522013) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:22	12/01/2025 14:22	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-14 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:23
Sample ID: CHS-DW-15 (70392522014) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.0159		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:25	12/01/2025 14:25	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-15 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:24
Sample ID: CHS-DW-16 (70392522015) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:27	12/01/2025 14:27	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-16 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:26
Sample ID: CHS-DW-18 (70392522016) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:29	12/01/2025 14:29	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-17 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:27
Sample ID: CHS-DW-19 (70392522017) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:32	12/01/2025 14:32	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-18 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:28
Sample ID: CHS-DW-20 (70392522018) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:34	12/01/2025 14:34	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-19 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:42
Sample ID: CHS-F-21 (70392522019) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00844		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:41	12/01/2025 14:41	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-20 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:41
Sample ID: CHS-F-22 (70392522020) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00739		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:44	12/01/2025 14:44	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-21 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:36
Sample ID: CHS-F-23 (70392522021) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00610		mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:46	12/01/2025 14:46	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Lab ID: 25K1936-22 **Matrix:** Drinking Water **Date Collected:** 11/14/2025 05:39
Sample ID: CHS-F-24 (70392522022) **Date Received:** 11/24/2025 08:00

Total Metals - PAS - Fairfield, NJ

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	ND	U	mg/L	0.000492	0.00200	EPA 200.8	12/01/2025 14:48	12/01/2025 14:48	1

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Qualifiers

U Compound not detected

Abbreviations

DET	Analyte DETECTED
ND	Analyte NOT DETECTED at or above the Reporting Detection Limit (RDL)
NR	Not Reported
dry	Sample results reported on a dry weight basis
RPD	Relative Percent Difference
<	Less than reporting limit
≤	Less than or equal to reporting limit
>	Greater than reporting limit
≥	Greater than or equal to reporting limit
MDL	Method Detection Limit
RDL	Reporting Detection Limit
MCL/AL	Maximum Contaminant Level/Action Level
mg/kg wet	Results reported as wet weight
TTLC	Total Threshold Limit Concentration
STLC	Soluble Threshold Limit Concentration
TCLP	Toxicity Characteristic Leachate Procedure

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

Laboratory Certification List for this report.

Laboratory	Certification			
	NJ	NY	PA	CT
Pace Analytical Services, LLC Ewing 812 Silvia Street Ewing, NJ 08628	11005	12046	68-05417	
Pace Analytical Services, LLC-Fairfield 1275 Bloomfield Ave, Ste 37D Fairfield, NJ 07004	07010	11634	68-02903	

PASI New York Laboratory



25K1936

Pace Analytical Services, LLC Melville, NY
Chatham High School 11/14



Workorder: 70392522

Workorder Name: CHATHAM HIGH SCHOOL 11/14

Results Requested By: 12/4/2025

[illegible]

PASI New York Laboratory



Workorder: 70392522

Workorder Name: CHATHAM HIGH SCHOOL 11/14

Results Requested By: 12/4/2025



Report / Invoice To		Subcontract To		Requested Analysis															
Alexandria Correa Pace Analytical Melville 575 Broad Hollow Road Melville, NY 11747 Phone 516-370-6000 Email: alexandria.correa@pacelabs.com				P.O. _____		200.8 LEAD ONLY LAB USE ONLY													
Send Invoice To: invoices@pacelabs.coupahost.com State of Sample Origin: NY				Preserved Containers															
Item	Sample ID	Collect Date/Time	Lab ID	Matrix	HNO3														
20	CHS-F-22	11/14/2025 05:41	70392522020	Drinking															
21	CHS-F-23	11/14/2025 05:36	70392522021	Drinking															
22	CHS-F-24	11/14/2025 05:39	70392522022	Drinking															
23																			
24																			
Transfers												Comments							
Released By	Date/Time	Received By	Date/Time	NY BOCES SCHOOL LEAD EDD															
1																			
2																			
Cooler Temperature on Receipt °C				Custody Seal Y or N				Received on Ice Y or N				Samples Intact Y or N							

WO#: 70392522



70392522

PACE LABS

Pace Labs address: 14 Walker Way, Albany, NY 12205

District Name: Chatham CSD

School Name: Chatham High School

Street address: 50 Woodbridge Ave, Chatham, NY 12037

Customer Project #

Project Name: Lead in Water testing

Site collection: Lisa Lyons 518 337 7722

Contact/Report to: Ethan Stalter and Lisa Lyons

Phone: 518-788-6264

Email: staltere@chatham.k12.ny.us lisa.lyons@questar.org

Invoice to: Holly Sherman

Email: shermanh@chatham.k12.ny.us

Purchase order #26-0085

Quote # \$14.25 per sample

County State of origin of sample: Columbia County, New York

Chain of Custody

Number	Sample ID	Chatham High School - CHS	Collection		Grab	# of Containers	Analysis Required
			Date	Time			
1	CHS-F-1	Main Office Kitchen Sink	11/14/2025	5:18 AM	X	1	Lead
2	CHS-DW-2	Room 147 - Womens Rm Fountain	11/14/2025	5:17 AM	X	1	Lead
3	CHS-DW-3	Corridor across from 110 Fountain Left	11/14/2025	5:16 AM	X	1	Lead
4	CHS-DW-4	Corridor across from 110 Fountain Right	11/14/2025	5:15 AM	X	1	Lead
5	CHS-DW-5	Corridor across from 110 Bottle Filler	11/14/2025	5:14 AM	X	1	Lead
6	CHS-F-6	Room 107 Health Sink	11/14/2025	5:12 AM	X	1	Lead
7	CHS-F-7	Room 156 Faculty Sink	11/14/2025	5:09 AM	X	1	Lead
8	CHS-KS-8	Kitchen Prep Sink	11/14/2025	5:02 AM	X	1	Lead
9	CHS-KS-9	Kitchen Prep Sink	11/14/2025	5:03 AM	X	1	Lead
10	CHS-KS-10	Kitchen Prep Sink	11/14/2025	5:04 AM	X	1	Lead
11	CHS-KS-11	Kitchen Prep Sink	11/14/2025	5:07 AM	X	1	Lead
12	n/a	n/a					
13	CHS-DW-13	Room 151 Custodian Fountain	11/14/2025	5:21 AM	X	1	Lead
14	CHS-DW-14	Corridor next to Rm 151 Fountain Left	11/14/2025	5:22 AM	X	1	Lead
15	CHS-DW-15	Corridor next to Rm 151 Fountain Right	11/14/2025	5:23 AM	X	1	Lead
16	CHS-DW-16	Corridor next to Rm 151 Bottle Filler	11/14/2025	5:24 AM	X	1	Lead
17	n/a	n/a					
18	CHS-DW-18	Outside Gym Fountain Left	11/14/2025	5:26 AM	X	1	Lead
19	CHS-DW-19	Outside Gym Fountain Right	11/14/2025	5:27 AM	X	1	Lead
20	CHS-DW-20	Outside Gym Bottle Filler	11/14/2025	5:28 AM	X	1	Lead
21	CHS-F-21	Room 134 Nurse Sink	11/14/2025	5:42 AM	X	1	Lead
22	CHS-F-22	Room 131A Library Prep Sink	11/14/2025	5:41 AM	X	1	Lead
23	CHS-F-23	Room 123A Sink	11/14/2025	5:36 AM	X	1	Lead
24	CHS-F-24	Room 124A Sink	11/14/2025	5:39 AM	X	1	Lead
Relinquished by/Company: (Signature) <i>Lisa Lyons</i> <i>QIII</i>			Received by:	Date/Time	Tracking Number:		
Relinquished by/Company: (Signature) <i>John E. Lyons</i>			Received by:	Date/Time	Delivered by:		
Relinquished by/Company: (Signature) <i>John E. Lyons</i>			Received by:	Date/Time	Page ____ of ____		

KS 11/18/25 La allison Day PACE LI 11/18/25 600

DC#_Title: ENV-FRM-MELV-0024 v07_SCUR
Effective Date: 4/12/2024

WO#: 70392522

PM: ALC Due Date: 12/04/25
CLIENT: CCSD_QIII

Client Name:

CCSD-QIII

Project #

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client ☐ Commercial ☐ Pace ☐ Other

Tracking #:

Custody Seal on Cooler/Box Present: ☐ Yes ☒ No Seals intact: ☐ Yes ☐ No Temperature Blank Present: ☐ Yes ☒ No

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ Ziploc ☐ None ☐ Other Type of Ice: Wet Blue None

Thermometer Used: THQ11 Correction Factor: +1 ☐ Samples on ice, cooling process has begun

Cooler Temperature(°C): 19.1 Cooler Temperature Corrected(°C): 19.2 Date/Time 5035A kits placed in freezer

Temp should be above freezing to 6.0°C

USDA Regulated Soil ☒ N/A, water sample

Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX, or VA (check map)? ☐ Yes ☐ No

Did samples originate from a foreign source including Hawaii and Puerto Rico? ☐ Yes ☐ No

If Yes to either question, fill out a Regulated Soil Checklist (ENV-FRM-MELV-0076) and include with SCUR/COC paperwork.

Date and Initials of person examining contents:

AD 11/20/25

	COMMENTS:
Chain of Custody Present: ☒ Yes ☐ No	1.
Chain of Custody Filled Out: ☒ Yes ☐ No	2.
Chain of Custody Relinquished: ☒ Yes ☐ No	3.
Sampler Name & Signature on COC: ☒ Yes ☐ No ☐ N/A	4.
Samples Arrived within Hold Time: ☒ Yes ☐ No	5.
Short Hold Time Analysis (<72hr): ☐ Yes ☒ No	6.
Rush Turn Around Time Requested: ☐ Yes ☒ No	7.
Sufficient Volume: (Triple volume provided for MS/MSD) ☒ Yes ☐ No	8.
Correct Containers Used: ☒ Yes ☐ No	9.
-Pace Containers Used: ☒ Yes ☐ No	10.
Containers Intact: ☒ Yes ☐ No	11.
Filtered volume received for Dissolved tests ☐ Yes ☐ No ☒ N/A	Note: if sediment is visible in the dissolved container.
Sample Labels match COC: ☒ Yes ☐ No	12.
-Includes date/time/ID/Analysis Matrix: SL <u>WT</u> OIL OTHER	

Date and Initials of person checking preservation:

AD 11/20/25

All containers needing preservation have been ☒ Yes ☐ No ☐ N/A	13.	☐ HNO ₃ ☐ H ₂ SO ₄ ☐ NaOH ☐ HCl
pH paper Lot # <u>210525</u>	Sample #	
All containers needing preservation are found to be in compliance with method recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH>9 Sulfide, ☒ Yes ☐ No ☐ N/A NAOH>12 Cyanide)	Initial when completed:	Lot # of added preservative:
Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water).	Date/Time preservative added:	
Per Method, VOA pH is checked after analysis	14.	
Samples checked for dechlorination: ☐ Yes ☐ No ☒ N/A	Positive for Res. Chlorine?	Y N
KI starch test strips Lot #	15.	
Residual chlorine strips Lot #	Positive for Sulfide?	Y N
SM 4500 CN samples checked for sulf ☐ Yes ☐ No ☒ N/A	16.	
Lead Acetate Strips Lot #	17.	
Headspace in ALK Bottle (>6mm): ☐ Yes ☐ No ☒ N/A		
Headspace in VOA Vials (>6mm): ☐ Yes ☐ No ☒ N/A		
Trip Blank Present: ☐ Yes ☐ No ☒ N/A		
Trip Blank Custody Seals Present ☐ Yes ☐ No ☒ N/A		

Client Notification/ Resolution:

Field Data Required? Y / N

Person Contacted:

Date/Time:

Comments/ Resolution:

* PM (Project Manager) review (which includes the SCUR) is documented electronically in LIMS.

Pace® Location Requested (City/State):		CHAIN-OF-CUSTODY Analytical Request Document Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields		 Scan QR Code for instructions																																																																																																																																																																	
Company Name: Chatham Central School District Street Address: High School 50 Woodbridge Ave. Chatham, NY 12037		Contact/Report To: Ethan Stalter Phone #: 518 788-6264 E-Mail: staltere@chatham.k12.ny.us Cc E-Mail:																																																																																																																																																																			
Customer Project #: Project Name: Lead in Water testing		Invoice to: Holly Sherman Invoice E-mail: shermanh@chatham.k12.ny.us																																																																																																																																																																			
Site Collection Info/Facility ID (as applicable): Chatham High School H.S		Purchase Order # (if applicable): P.O. # 26-0085 Quote #: 14.25 per sample																																																																																																																																																																			
Time Zone Collected: [] AK [] PT [] MT [] CT ☒ ET		County / State origin of sample(s):																																																																																																																																																																			
Data Deliverables: ☐ Level II ☐ Level III ☐ Level IV ☐ EQUIS ☐ Other:		Regulatory Program (DW, RCRA, etc.) as applicable: Rush (Pre-approval required): ☐ Same Day [] 1 Day [] 2 Day [] 3 Day Other _____ Date Results Requested:		Reportable [] Yes [] No DW PWSID # or WW Permit # as applicable: Field Filtered (if applicable): [] Yes [] No Analysis:																																																																																																																																																																	
* Matrix Codes (Insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Wastewater (WW), Product (P), Soil/Solid (SS), Oil (OL), Wipe (WP), Tissue (TS), Bioassay (B), Vapor (V), Surface Water (SW), Sediment (SED), Sludge (SL), Caulk (CK), Leachate (LL), B'osolid (BS), Other (OT)																																																																																																																																																																					
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CHS-DW-5 (Corridor Rm 110 Bottle Filler)						5:14	5																																																																																																																																																														
CHS-F-6 (Rm 107 Health)						5:12	6																																																																																																																																																														
CHS-F-7 (Room 156 FACULTY)						5:09	7																																																																																																																																																														
CHS-KS-8 (BACK WALL RIGHT)						5:02	8																																																																																																																																																														
CHS-KS-9 (BACK WALL CENTER)						5:03	9																																																																																																																																																														
CHS-KS-10 (BACK WALL LEFT)						5:04	10																																																																																																																																																														
Lab Use Only		Preservation non-conformance identified for sample																																																																																																																																																																			
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Additional Instructions from Pace®:		Collected By: Printed Name Signature		Customer Remarks / Special Conditions / Possible Hazards: # Coolers: Thermometer ID: Correction Factor (°C): Obs. Temp. (°C): Corrected Temp. (°C): [] On Ice																																																																																																																																																																	
Relinquished by/Company: (Signature)		Date/Time:		Received by/Company: (Signature)																																																																																																																																																																	
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Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace® Terms and Conditions found at <https://www.pacelabs.com/resource-library/resource/pace-terms-and-conditions/>

ENV-FRM-CORQ-0019_v02_110123 ©

Pace® Location Requested (City/State):		CHAIN-OF-CUSTODY Analytical Request Document Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields										
Company Name: Chatham Central School District		Contact/Report To: Ethan Stalter										
Street Address: High School 50 Woodbridge Ave. Chatham, NY 12037		Phone #: 518-788-6264										
Customer Project #:		E-Mail: staltere@chatham.k12.ny.us										
Project Name: Lead in Water Testing		Invoice to: Holly Sherman										
Site Collection Info/Facility ID (as applicable): High School H.S.		Invoice E-mail: shermanh@chatham.k12.ny.us										
Time Zone Collected: [] AK [] PT [] MT [] CT [x] ET		Purchase Order # (if applicable): P.O. # 26-0085										
Data Deliverables: [] Level II [] Level III [] Level IV [] EQUIS [] Other		Quote #: 14.25 per sample										
Regulatory Program (DW, RCRA, etc.) as applicable:		County / State origin of sample(s):										
Rush (Pre-approval required): [] Same Day [] 1 Day [] 2 Day [] 3 Day Other _____		Reportable [] Yes [] No										
Date Results Requested:		DW PWSID # or WW Permit # as applicable:										
Field Filtered (if applicable): [] Yes [] No												
Analysis:												
Matrix Codes (Insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Wastewater (WW), Product (P), Soil/Solid (SS), Oil (OL), Wipe (WP), Tissue (TS), Bioassay (B), Vapor (V), Surface Water (SW), Sediment (SED), Sludge (SL), Caulk (CK), Leachate (LL), Biosolid (BS), Other (OT)												
Customer Sample ID		Matrix *	Comp / Grab	Composite Start Date Time		Collected or Composite End Date Time		# Cont.	Residual Chlorine Result Units		Sample Comment	
CHS-F-21 (Rm 134 Nurse Bath)						5:42 21					Bathroom Sink	
CHS-F-22 (Rm 131 A Library)						5:41 22					Sink	
CHS-F-23 (RM 123 A PREP)						5:36 23					Sink	
CHS-F-24 (RM 124 A PREP)						5:39 24					Sink	
Additional Instructions from Pace®:		Collected By: Printed Name Signature		Customer Remarks / Special Conditions / Possible Hazards: # Coolers: Thermometer ID: Correction Factor (°C): Obs.Temp.(°C): Corrected Temp.(°C): [] On Ice								
Relinquished by/Company: (Signature)		Date/Time:	Received by/Company: (Signature)		Date/Time:		Tracking Number:					
Relinquished by/Company: (Signature)		Date/Time:	Received by/Company: (Signature)		Date/Time:		Delivered by: [] In-Person [] Courier					
Relinquished by/Company: (Signature)		Date/Time:	Received by/Company: (Signature)		Date/Time:		[] FedEx [] UPS [] Other					
Relinquished by/Company: (Signature)		Date/Time:	Received by/Company: (Signature)		Date/Time:		Page: 3 of 3					

Sample Condition Upon Receipt Form (SCUR)



Affix Sample Label Here

Date and Initials of person:

Examining contents: KR

Label: _____

Deliver to location: _____

pH: _____

Thermometer Used: 717205

Date: 11/24/25

Time: 8:00

Initials: KR

State of Origin: NY

Cooler #1 Temp. °C 18.6 (Visual) -1.5 (Correction Factor) 17.1 (Actual)

☐ Samples on ice, cooling process has begun

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client ☐ Commercial ☒ Pace

☐ Other _____

Shipping Method: ☐ First Overnight ☐ Priority Overnight ☐ Standard Overnight ☐ Ground

☐ Other _____

Tracking # _____

Custody Seal on Cooler/Box Present: ☐ Yes ☒ No

Seals intact: ☐ Yes ☐ No

Ice: Wet Blue Melted None

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

Samples were collected by Pace employee ☐ Yes ☒ No ☐ N/A

Comments:

Chain of Custody Present	☒ Yes ☐ No ☐ N/A	
Chain of Custody Filled Out	☒ Yes ☐ No ☐ N/A	
Relinquished Signature on COC	☒ Yes ☐ No ☐ N/A	
Sampler Name and Signature on COC	☒ Yes ☐ No ☐ N/A	
Samples Arrived within Hold Time	☒ Yes ☐ No ☐ N/A	
Rush TAT requested on COC	☒ Yes ☐ No ☐ N/A	
Sufficient Volume	☒ Yes ☐ No ☐ N/A	
Correct Containers Used	☒ Yes ☐ No ☐ N/A	
Containers Intact	☒ Yes ☐ No ☐ N/A	
Sample Labels match COC (sample IDs & date/time of collection)	☒ Yes ☐ No ☐ N/A	
All containers needing acid/base preservation have been checked.	☒ Yes ☐ No ☐ N/A	Preservation Information: Preservative: _____ Lot #/Trace #: _____ Date: _____ Time: _____ Initials: _____
All Containers needing preservation are found to be in compliance with EPA recommendation:	☒ Yes ☐ No ☐ N/A	
Exceptions: Vials, Microbiology, O&G, Metals		
Headspace in VOA Vials? (>6mm):	☐ Yes ☐ No ☒ N/A	
Trip Blank Present:	☐ Yes ☐ No ☒ N/A	

Additional Login Comments:

Client notification/ Resolution

Person Contacted: _____

Date/Time: _____

Comments/Resolution: _____