Neilson Research Corporation
245 S Grape St
Medford, OR 97501
TEL: (541) 770-5678 FAX: (541) 770-2901
Website: www.nrclabs.com

August 28, 2023

Leandra Pannell
McCowan Clinical Laboratory
178 W Commercial
Coos Bay, OR 97420
TEL: (541) 267-7853
FAX (541) 267-4025

RE: Lighthouse Pre K Order No.: 23081081

Dear Leandra Pannell:

Neilson Research Corporation received 2 sample(s) on 8/22/2023 for the analyses presented in the following report.

The results relate only to the parameters tested or to the sample as received by the laboratory. This report shall not be reproduced except in full, without the written approval of Neilson Research Corporation. If you have any questions regarding these test results, please feel free to call.

Sincerely,
Neilson Research Corporation

Tamra Schmedemann
Senior Project Manager
245 S Grape St
Medford, OR 97501

Original

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Case Narrative

WO#: **23081081**
Date: **8/28/2023**

CLIENT: McCowan Clinical Laboratory
Project: Lighthouse Pre K

The analyses were performed according to the guidelines in the Neilson Research Corporation Quality Assurance Program. This report contains analytical results for the sample(s) as received by the laboratory.

Neilson Research Corporation certifies that this report is in compliance with the requirements of NELAP. No unusual difficulties were experienced during analysis of this batch except as noted below or qualified with data flags on the reports.

Original

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Analytical Report

WO#: **23081081**
Date Reported: **8/28/2023**

McCowan Clinical Laboratory
178 W Commercial
Coos Bay , OR 97420

Lab Order: 23081081
Received Date: 8/22/2023 11:18:00 AM
Reported Date: 8/28/2023 12:32:44 PM

Sample Information: 62858 Hwy 101
Coos Bay, OR 97420

Lab ID: **23081081-01** Client Sample ID: Pre K Sink
Collection Date: 8/18/2023 8:11:00 AM Collected By: Leah Scott
Matrix: Drinking Water Sample Location: Pre K Sink

Trace Metals by EPA 200.8 ICP-MS — Analyst; CBB

Analyses	Result	Qual	MRL	Units	DF	Date Analyzed	MCL	NELAP Status
Lead	1.50		0.500	ppb	1	8/23/2023	15.0	A

Lab ID: **23081081-02** Client Sample ID: Pre K Fountain
Collection Date: 8/18/2023 8:11:00 AM Collected By: Leah Scott
Matrix: Drinking Water Sample Location: Pre K Fountain

Trace Metals by EPA 200.8 ICP-MS — Analyst; CBB

Analyses	Result	Qual	MRL	Units	DF	Date Analyzed	MCL	NELAP Status
Lead	4.88		0.500	ppb	1	8/23/2023	15.0	A

QUALIFIERS

*	Value exceeds Maximum Contaminant Level.	C1	Sample container temperature is out of limit as specified at testcode
E	Value above quantitation range	H	Holding times for preparation or analysis exceeded
J	Analyte detected below quantitation limits	MI	Recovery outside comtrol limits due to Matrix Interference
ND	Not Detected at the Reporting Limit	PL	Permit Limit
PRE	Percent RE exceeds the Limit	R	RPD outside accepted recovery limits

NELAP NELAP A Accredited in accordance with NELAP ORELAP 100016, OR-028

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Sample Log-In Check List

Client Name: **MCCOWANCLINICALLA** Work Order Number: **23081081** RcptNo: **1**

Logged by:	**Kathryn Johnson**	**8/22/2023 11:18:00 AM**	Kathryn Johnson
Completed By:	**Jordan Diemer**	**8/25/2023 5:52:20 PM**	
Reviewed By:	**Dorie Evans**	**8/28/2023 12:30:07 PM**	

Chain of Custody

1.	Is Chain of Custody complete?	Yes ☑	No ☐	Not Present ☐
2.	How was the sample delivered?	UPS		

Log In

3.	Coolers are present?	Yes ☑	No ☐	NA ☐
4.	Shipping container/cooler in good condition?	Yes ☑	No ☐	
	Custody seals intact on shipping container/cooler?	Yes ☐	No ☐	Not Present ☑
	No. Seal Date:	Signed By:		
5.	Was an attempt made to cool the samples?	Yes ☑	No ☐	NA ☐
6.	Were all samples received at a temperature of >0° C to 6.0°C	Yes ☑	No ☐	NA ☐
7.	Sample(s) in proper container(s)?	Yes ☑	No ☐	
8.	Sufficient sample volume for indicated test(s)?	Yes ☑	No ☐	
9.	Are samples (except VOA and ONG) properly preserved?	Yes ☑	No ☐	
10.	Was preservative added to bottles?	Yes ☐	No ☑	NA ☐
11.	Is the headspace in the VOA vials less than 1/4 inch or 6 mm?	Yes ☐	No ☐	No VOA Vials ☑
12.	Were any sample containers received broken?	Yes ☐	No ☑	
13.	Does paperwork match bottle labels? (Note discrepancies on chain of custody)	Yes ☑	No ☐	
14.	Are matrices correctly identified on Chain of Custody?	Yes ☑	No ☐	
15.	Is it clear what analyses were requested?	Yes ☑	No ☐	
16.	Were all holding times able to be met? (If no, notify customer for authorization.)	Yes ☑	No ☐	

Special Handling (if applicable)

17. Was client notified of all discrepancies with this order? Yes ☐ No ☐ NA ☑

Person Notified: Date

By Whom: Via: ☐ eMail ☐ Phone ☐ Fax ☐ In Person

Regarding:

Client Instructions:

18. Additional remarks:

Cooler Information

Cooler No	Temp ºC	Condition	Seal Intact	Seal No	Seal Date	Signed By
1	3.1	Good				KJ

NEILSON RESEARCH CORPORATION

Chain of Custody Record

This Chain of Custody is a LEGAL DOCUMENT and must be filled out accurately.

Section A
Required Client Information

Company:	MCCOWAN CLINICAL LABORATORY, INC
Address:	178 W COMMERCIAL
	COOS BAY. OR 97420
Email:	mccowanlab@gmail.com
Phone:	541-267-7853 Fax: 541-267-4025
Collected By (Print):	Leah Scott
Collected By (Sign):	Leah Scott
Email Report XX	Mail Report ___ Fax Report ___

Section B
Required Project Information

Project Name:	Lighthouse PreK
Project Number:	
Report To:	mccowanlab@gmail.com
Copy To:	prek@thelighthouseschool.org
PLEASE REPORT TO DWP FOR PWS	_____ TO DEQ FOR PERMIT _____

Section C
Invoice Information

Attention:	OFFICE
Company Name:	MCCOWAN CLINICAL LABORATORY
Address:	mccowanlab@gmail.com

Section D
Rush Status (Subject to Scheduling)

- X Standard: 10 Business Days
- ___ Priority: 5 Business Days (List × 1.50)
- ___ Express: 3 Business Days (List × 1.75)
- ___ Rush: 2 Business Days (List × 2.00)
- ___ Rush: Same Day (List × 3.00)

Authorized ____ Yes ____ No

Section E
Sample Information

Sample ID	Comp/Grab	Matrix*	Date Collected	Time Collected	No. of Containers	Analysis Requested: Lead	Analysis Requested: Lead	Remarks / Field Data	NRC Sample # (Lab Use Only)
02858 Hwy 101 CB PreK Sink	Sink	W	8-18-23	8:11am	1	✓		-	01
02858 Hwy 101 C.B PreK Fountain	Fountain	DW	8-18-23	8:11am	1		✓		02

NRC Workorder # (Lab Use Only) 23081081

*Matrix: **DW** - Drinking Water **WW** - Wastewater **W** - Water **S** - Soil/Solid **SL** - Sludge **O** - Oil **WP** - Wipe **OT** - Other

Section F
Relinquish/Receive

	Sign	Print	Date	Time
Relinquished By:	Leah Scott	Leah Scott	8-18-23	8:28am
Received By:	C. Troyer	Cayl Troyer	8/18/23	0858
Relinquished By:	C. Troyer	Cayl Troyer	8/18/23	UPS
Received By:				
Relinquished By:				
Received By Laboratory:	K Johnson	K. Johnson	8/22/23	11:18

Section G
Lab Use Only

Temp:	3.1 ID-C
4°C +/- 2°C:	Yes ___ No
Received on Ice:	Yes ___ No
Number of Bottles Received:	2
pH Checked:	—
COC Seals Intact:	___ Yes ___ No ___ NA
Field Blank Included:	___ Yes ___ No
Received Via	UPS ___ FedEX ___ Other ___ Hand
Payment:	Invoice ___ Cash ___ VISA, M/C ___ Check # _____ Amount _____