

STAT Analysis Corporation

2242 West Harrison St., Suite 200, Chicago, IL 60612-3766

Tel: (312) 733-0551 Fax: (312) 733-2386 STATinfo@STATAnalysis.com

Accreditations: IEPA ELAP 100445; ORELAP IL300001; AIHA-LAP, LLC 101160; NVLAP LabCode 101202-0

January 12, 2018

United Analytical Service, Inc.
1429 Centre Circle Drive
Downers Grove, IL 60515
Telephone: (630) 691-8271
Fax: (630) 691-1819

Analytical Report for STAT Work Order: 18010145 Revision 0

RE: 1798677-01

Dear Thad Daniels:

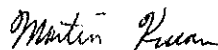
STAT Analysis received 2 samples for the referenced project on 1/9/2018 2:00:00 PM. The analytical results are presented in the following report.

All analyses were performed in accordance with the requirements of 35 IAC Part 186 / NELAP standards. Analyses were performed in accordance with methods as referenced on the analytical report. Those analytical results expressed on a dry weight basis are also noted on the analytical report.

All analyses were performed within established holding time criteria, and all Quality Control criteria met EPA or laboratory specifications except when noted in the Case Narrative or Analytical Report. If required, an estimate of uncertainty for the analyses can be provided. A listing of accredited methods/parameters can also be provided.

Thank you for the opportunity to serve you and I look forward to working with you in the future. If you have any questions regarding the enclosed materials, please contact me at (312) 733-0551.

Sincerely,



Martin Kucan

Project Manager

The information contained in this report and any attachments is confidential information intended only for the use of the individual or entities named above. The results of this report relate only to the samples tested. If you have received this report in error, please notify us immediately by phone. This report shall not be reproduced, except in its entirety, unless written approval has been obtained from the laboratory. This analytical report shall become property of the Customer upon payment in full. Otherwise, STAT will be under no obligation to support, defend or discuss the analytical report.

Client: United Analytical Service, Inc.
Project: 1798677-01
Work Order: 18010145 Revision 0

Work Order Sample Summary

Lab Sample ID	Client Sample ID	Tag Number	Collection Date	Date Received
18010145-001A	TMS-FPW-115Aa	R	1/9/2018 6:15:00 AM	1/9/2018
18010145-002A	TMS-FPW-115Ab	R	1/9/2018 6:15:00 AM	1/9/2018

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Date Reported: January 12, 2018

ANALYTICAL RESULTS

Date Printed: January 12, 2018

Client: United Analytical Service, Inc.

Work Order: 18010145 Revision 0

Project: 1798677-01

Client ID	Additional Info	Sample ID	Matrix	Lead Result	Units	Qualifier	Analyst	Date Analyzed	Analytical Method
TMS-FPW-115Aa R		18010145-001A	Water	< 2.00	µg/L (ppb)		MDT	01/11/2018	E200.8R5.4
TMS-FPW-115Ab R		18010145-002A	Water	< 2.00	µg/L (ppb)		MDT	01/11/2018	E200.8R5.4

Qualifiers: B - Analyte detected in the associated Method Blank
S - Spike Recovery outside accepted recovery limitsR - RPD outside accepted recovery limits
E - Value above quantitation range
* - Non-accredited parameter

CHAIN OF CUSTODY RECORD

Client: United Analytical Services
 Street Address: 1429 Centre Circle Dr.
 City, State, Zip: Dawson Grove, IL 60815
 Phone: 630-691-8271
 Fax: 630-691-1919
 e-mail/Alt. Fax: tdawson@uas1.com
 Project Number: 1798677-01
 Project Name: _____
 Project Location: _____
 Project Manager: Tina Dawson
 P.O. Number: 1798677-01

Turn Around: 4 Hrs. 8 Hrs. 24 Hrs. 1 Day 2 Days 3 Days 5 Days

Date Due: STANDARD Due: TAT

OFFICE USE ONLY BELOW

Batch No.: 15010145
 Samples Acceptable: Yes: No:
 Checked by (Initial/Date): MK 1/2/18
 QC by (Initial/Date): _____
 Reported By (Initial/Date/Time/Method): _____

Relinquished by: _____ Date/Time: 1/9/18 1:30 PM
 Received by: _____ Date/Time: 1/9/18 2:00 PM
 Relinquished by: _____ Date/Time: _____
 Received by: _____ Date/Time: _____
 Relinquished by: _____ Date/Time: _____
 Received by: _____ Date/Time: _____

Client Sample Number/Description: Date Taken	Time		Rate (lpm)	Volume (Liters)	Area Wiped (ft ²)	Laboratory Sample No.	Lead Air	Lead Ambient Air	Lead Based Paint	Lead Soil	Lead Drinking Water	Lead Waste Water	Lead Wipe	TCLP Lead	TCLP RCRA Metals	Dust NIOSH 500	Dust NIOSH 600	Hexavalent Chromium	Other
	On	Off																	
TMS-FPW-115A9R	1/9/18	6:15a		250ml		001					X								
TMS-FPW-115A6R	1/9/18	6:15a		250ml		002					X								

Comments: KLARIN CASI USED 01/09/18 @ 8:40 PM
* NITRIC ACID

Sample Receipt Checklist

Client Name: **UNITED ANALYTICAL**

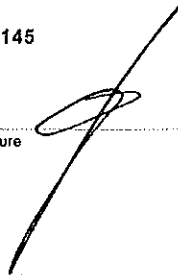
Date and Time Received: **1/9/2018 2:00:00 PM**

Work Order Number **18010145**

Received by: **JOK**

Checklist completed by:

Signature



Date

1/9/18

Reviewed by:

Initials

MK

Date

1/9/18

Matrix:

Carrier name: Client Delivered

- Shipping container/cooler in good condition? Yes No Not Present
- Custody seals intact on shipping container/cooler? Yes No Not Present
- Custody seals intact on sample bottles? Yes No Not Present
- Chain of custody present? Yes No
- Chain of custody signed when relinquished and received? Yes No
- Chain of custody agrees with sample labels/containers? Yes No
- Samples in proper container/bottle? Yes No
- Sample containers intact? Yes No
- Sufficient sample volume for indicated test? Yes No
- All samples received within holding time? Yes No
- Container or Temp Blank temperature in compliance? Yes No Temperature Ambient °C
- Water - VOA vials have zero headspace? Yes No No VOA vials submitted Yes No
- Water - Samples pH checked? Yes No Checked by: **JOK**
- Water - Samples properly preserved? Yes No pH Adjusted? **No**

Any No response must be detailed in the comments section below.

Comments: Rush per Joe Frey verbal 1/11/18.

Client / Person contacted: _____ Date contacted: _____ Contacted by: _____

Response: _____

18010145

Laboratory ID	Client ID	CollectionDate	Units	Lead
18010145-001A	TMS-FPW-115Aa R	1/9/2018	µg/L (ppb)	< 2.00
18010145-002A	TMS-FPW-115Ab R	1/9/2018	µg/L (ppb)	< 2.00