

# RIVERVIEW GARDENS

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## SCHOOL DISTRICT

**Joylynn Pruitt-Adams, Ed.D.,**  
**Superintendent**

March 19, 2024

1370 Northumberland Drive  
St. Louis, MO 63137  
Office 314.869.2505 x 20102  
Fax 314.388.6003  
[www.rgsd.k12.mo.us](http://www.rgsd.k12.mo.us)

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### MISSION

*Collaboratively educate and empower our scholars to thrive in challenging environments*

### VISION

*RGSD will be a district where:*

- *There are high expectations for all.*
- *There will be healthy, loving, empathetic and kind relationships.*
- *Students are at the center of our decisions.*
- *Supports are provided so students become grade-level ready.*
- *There is transparency, accountability, timely, clear communication, and high levels of customer service.*
- *All stakeholders have a voice.*
- *There is a focus on college and career readiness.*

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### Special Administrative Board

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Dear Riverview Gardens High School parents and staff,

On February 2, 2024, I shared information regarding the Get the Lead Out of School Drinking Water Act and its requirements for school districts.

The Environmental Protection Agency (EPA) currently has a lead drinking water standard limit of 15 micrograms per liter (ug/L) of lead in water. However, Missouri law requires that all Missouri schools achieve a 5 ug/L limit of lead in water.

During February 2024, all RGSD schools and buildings were tested for lead concentration in school drinking water outlets.

At Riverview Gardens High School, testing identified seven (7) drinking water outlets that did not meet the 5 ug/L Missouri standard limit of lead in water.

Upon receiving the results, each of these water sources was taken out of service by our district facilities team. At this time, we have already begun working with Merlo Plumbing to remediate each source needing attention.

Before being placed back in service, water from each source will be tested to ensure the issue has been resolved. We will communicate additional results after testing takes place.

Meanwhile, all students and staff continue to have access to a variety of water outlets that have met compliance, throughout the school.

If you have questions about a lead sample result at a specific outlet and actions taken, or if you have concerns, please email [karl.scheidt@rgsd.k12.mo.us](mailto:karl.scheidt@rgsd.k12.mo.us).

To view reports for all schools/buildings throughout Riverview Gardens School District, please visit <https://www.rgsdmo.org/facilities/gettheleadout>.

Sincerely,



Joylynn Pruitt-Adams, Ed.D.  
Superintendent

**REPORT OF DRINKING WATER SAMPLING FOR  
LEAD CONTENT AT:**

**RIVERVIEW GARDENS HIGH SCHOOL  
1218 SHEPLEY DR.  
ST. LOUIS, MISSOURI 63137**



*PREPARED FOR:*

**MR. KARL SCHEIDT  
DIRECTOR OF FACILITIES AND FOOD SERVICES  
RIVERVIEW GARDEN SCHOOL DISTRICT  
10101 LEWIS AND CLARK BLVD  
ST. LOUIS, MISSOURI 63136**

*PREPARED BY:*

**J.S. HELD, LLC  
#6 MEADOW HEIGHTS PROFESSIONAL PARK  
COLLINSVILLE, ILLINOIS 62234  
(618) 343-3590**

**MARCH 2024**

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1218 Shepley Dr.  
St. Louis, Missouri 63136

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# EXECUTIVE SUMMARY

On the morning of February 22<sup>nd</sup>, 2024, J.S. Held performed lead testing of multiple water sources at Riverview Gardens High School, 1218 Shepley Dr. St. Louis, Missouri 63136. The sampling was performed by trained and licensed personnel in accordance with USEPA, HUD and State of Missouri Regulations and Guidelines. Work was performed in accordance with the newly amended Missouri Senate Bill 681.

All inspectors involved with sampling activities had EPA approved training in lead. Certifications for our firm and the inspector collecting the samples are included as Appendix C to this document.

All samples were collected on a “first draw” and “second draw” basis. “First draw” is achieved by allowing the water system to rest for at least eight hours prior to sampling in order to collect any existing debris or settlement within the sample. The intent of this sampling is to replicate “worst case scenario” conditions. JSH proposes to collect a second sample from each source as a “follow-up sample” per the Missouri Senate Bill 681 requirements. As such, J.S. Held inspectors met at the school at 4:00 a.m. to collect water samples before the systems were used by staff or students. The State of Missouri and other regulatory agencies recommend that water sources run for at least thirty seconds and as long as two minutes prior to use to avoid settling within the water system.

**Drinking water samples were collected from Forty-Eight (48) different locations throughout Riverview Gardens High School, 3 locations were inactive during the sampling event.** The water samples were collected from drinking fountains and sinks potentially utilized for cooking or drinking activities at the campus. After sample collection, samples were immediately iced down and delivered to Teklab, Inc. located in Collinsville, Illinois following strict chain of custody procedures. Teklab is a NELAP accredited and State of Illinois licensed laboratory specializing in drinking water analysis. Detailed sampling locations and sample results are located in Appendix A of this report.

The analytical sensitivity utilized for the analysis of the water samples submitted identified a reporting limit (RL) of 1.0 micrograms per liter ( $\mu\text{g/L}$ ). The analytical sensitivity utilized for the analysis of the water samples submitted identified a reporting limit (RL) of 1.0 microgram of lead per liter ( $\mu\text{g/L}$ ). This reporting value equates to 1.0 parts per billion (ppb) of lead. The USEPA action level for lead in drinking water is 15.0 ppb for PSW. The USEPA document titled “Lead in Drinking Water at Schools and Childcare Facilities” last updated November 9, 2015 identifies an action level for drinking water collected from a plumbing fixture as 20.0 ppb. **Eighty- Two (82) samples collected from the selected locations at Riverview Garden High School, reported sample results which were less than the action level.** This information can be found under the National Primary Drinking Water Regulations provided by

the EPA, CFR 2010 Title 40. (See Appendix A and B for Sample Results) The Missouri Senate Bill 1075 require potable plumbing fixtures to be less than 5.0 ppb, the levels area above 5 ppb, then action shall be necessary to filter the water from the fixture or clean/repair/replace the fixture and retest until the levels are reported below 5 ppb. **Seven (7) samples collected from the selected locations at the Riverview Garden High School reported sample results which are above 5 ppb** (See Appendix A and B for Sample Results)

**The following results are greater than the 5 ppb requirements under Senate Bill 681.**

**“First Draw” Sampling**

**Sample ID 02A Handwash Sink (Right) (164 ppb)**

**“Second Draw” Sampling**

**Sample ID 02B Handwash Sink (Right) (3.3 ppb)**

**“First Draw” Sampling**

**Sample ID 07A Handwash (Storage Room) (73.8 ppb)**

**“Second Draw” Sampling**

**Sample ID 07B Handwash (Storage Room) (<1.0 ppb)**

**“First Draw” Sampling**

**Sample ID 32A Building 3 Sink 4 (Room 303) (10.3 ppb)**

**“Second Draw” Sampling**

**Sample ID 32B Building 3 Sink 3 (Room 303) (<1.0 ppb)**

**“First Draw” Sampling**

**Sample ID 33A Building 3 Sink 4 (Room 303) (188 ppb)**

**“Second Draw” Sampling**

**Sample ID 33B Building 3 Sink 4 (Room 303) (<1.0 ppb)**

**“First Draw” Sampling**

**Sample ID 35A Building 3 Sink 6 (Room 303) (11.2 ppb)**

**“Second Draw” Sampling**

**Sample ID 35B Building 3 Sink 6 (Room 303) (1.4 ppb)**

### **“First Draw” Sampling**

<b>Sample ID 39A</b>	<b>Building 5 Gym Corner</b>	<b>(56.2 ppb)</b>
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### **“Second Draw” Sampling**

<b>Sample ID 39B</b>	<b>Building 5 Gym Corner</b>	<b>(20.2 ppb)</b>
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## **Conclusion/Recommendations**

At this time all water sources testing at 5 ppb or above should be removed from service until filtration can be added or these sources are repaired/replaced and retested reporting under 5 ppb. These sources are subject to additional maintenance activities and response actions prior to use. Before being put back in service. In addition, all sources will be subject to an ongoing maintenance program and re-testing at appropriate intervals.

Remediation includes decreasing lead concentrations below 5 parts per billion using such methods such as replacement of plumbing, solder, fittings, or fixtures, installations of filters and filter devices, or other effective methods in accordance with the new Missouri SB681 *Get the Lead Out Of Schools Drinking Water Act*

**The district will be required to provide notification to parents and staff within 7 days of receiving these sample results and results shall be posted on the district website within 2 weeks. Any samples reported over 5 ppb should be re-sampled on an annual basis at a minimum.**

**J.S. Held recommends that all water sources be run for at least thirty seconds prior to use as recommended by USEPA.**

**APPENDIX A**  
**SAMPLE LOCATIONS & RESULTS**

**Prep Day: 2/21/24**  
**Sample Day: 2/22/24**  
**To Lab -----> 2/22/24**

# to Test =	48
# Disabled =	3
# of Samples =	<b>89</b>
# > 10.0 ppb =	<b>7</b>
# > 5.0 ppb =	<b>0</b>

\* Reporting Limit

Source	Sample ID #	Sample Type	Sample Location	Source Notes	RL *	Lead Test Result
01	(A)	S	Sink by Stove		1.0	<1.0
	(B)				1.0	<1.0
	(C)				1.0	<1.0
02	(A)	S	Handwash sink right of main sink		1.0	<b>164</b>
	(B)				1.0	3.3
03	(A)	S	Kettle/ pot filler		1.0	<1.0
	(B)				1.0	<1.0
04	(A)	S	Center island		1.0	<1.0
	(B)				1.0	<1.0
05	(A)	S	Under Fan		1.0	<1.0
	(B)				1.0	<1.0
06	(A)	S	Handwash by loading dock		1.0	1.4
	(B)				1.0	3.2
07	(A)	S	Handwash in storage room		1.0	<b>73.8</b>
	(B)				1.0	<1.0
08	(A)	S	3 bay in storage room		1.0	<1.0
	(B)				1.0	<1.0
09	(A)	S	Dish washing/ sprayer		1.0	<1.0
	(B)				1.0	<1.0
10	(A)	F	Cafeteria		1.0	<1.0
	(B)				1.0	<1.0
11	(A)	F	Ram's Café		1.0	<1.0
	(B)				1.0	<1.0



Source	Sample ID #	Sample Type	Sample Location	Source Notes	RL *	Lead Test Result
12	(A)	F	Building 7, room to left, next to	Removed	1.0	
	(B)		sink		1.0	
13	(A)	F	Building 8 center		1.0	<1.0
	(B)		main hallway		1.0	<1.0
14	(A)	F	building 8 music hall		-	<1.0
	(B)				-	<1.0
15	(A)	F	building 9 next too room		1.0	<1.0
	(B)		904		1.0	<1.0
16	(A)	F	building 9 secretary office		1.0	<1.0
	(B)				1.0	<1.0
17	(A)	F	building 9 second floor near custodial closet		1.0	<1.0
	(B)				1.0	<1.0
18	(A)	F	building 9 3rd floor outside of		1.0	<1.0
	(B)		room 933		1.0	<1.0
19	(A)	S	Building 1 library lounge		1.0	<1.0
	(B)				1.0	<1.0
20	(A)	F	Building 1 by bathroom left		1.0	<1.0
	(B)				1.0	<1.0
21	(A)	F	building 1 by bathroom right		1.0	<1.0
	(B)				1.0	<1.0
22	(A)	F	building 2 outside of room 202		1.0	<1.0
	(B)				1.0	<1.0
23	(A)	F	building 2 outside of room 214		1.0	<1.0
	(B)				1.0	<1.0
24	(A)	F	building 3 outside of room 313	inactive	1.0	
	(B)				1.0	
25	(A)	F	building 3 outside of room 350		1.0	<1.0
	(B)				1.0	<1.0

Source	Sample ID #	Sample Type	Sample Location	Source Notes	RL *	Lead Test Result
26	(A)	F	building 3 outside of 302		1.0	<1.0
	(B)				1.0	<1.0
27	(A)	S	building 3 room 304		1.0	2.5
	(B)				1.0	<1.0
28	(A)	S	building 3 room 306		1.0	<1.0
	(B)				1.0	<1.0
29	(A)	S	building 3 room 310		-	<1.0
	(B)				-	<1.0
30	(A)	S	building 3 sink 1 Room 303		-	<1.0
	(B)				-	<1.0
31	(A)	S	building 3 sink 2 Room 303		2.0	<1.0
	(B)				1.0	<1.0
32	(A)	S	building 3 sink 3 Room 303		-	10.3
	(B)				-	<1.0
33	(A)	S	building 3 sink 4 room 303		1.0	188
	(B)				1.0	<1.0
34	(A)	S	building 3 sink 5 room 303		1.0	4.6
	(B)				1.0	1.6
35	(A)	S	building 3 sink 6 room 303		1.0	11.2
	(B)				1.0	1.4
36	(A)	F	building 5 foyer/outside		1.0	<1.0
	(B)		consession stand		1.0	<1.0
37	(A)	F	building 5 outside gym (right)		1.0	1.5
	(B)				1.0	<1.0
38	(A)	F	building 5 JV boys locker room	Removed	1.0	
	(B)		512		1.0	
39	(A)	F	building 5 Gym corner		1.0	56.2
	(B)				1.0	20.2

Source	Sample ID #	Sample Type	Sample Location	Source Notes	RL *	Lead Test Result
40	(A)	F	building 5 basement Weight Room		1.0	<1.0
	(B)				1.0	<1.0
41	(A)	F	building 5 basement girls locker		1.0	<1.0
	(B)		room closer to main door		1.0	<1.0
42	(A)	F	building 5 in bathroom by turf	Removed	1.0	
	(B)				1.0	
43	(A)	F	building 4 outside mens		1.0	<1.0
	(B)		restroom rm 403B		1.0	<1.0
44	(A)	F	building 4 outside corridor		1.0	<1.0
	(B)		with yellow lockers Rm 414		1.0	<1.0
45	(A)	S	Nurse Room 920		1.0	1.3
	(B)				1.0	3.4
46	(A)	F	Nurse Room 920		1.0	<1.0
	(B)				1.0	<1.0
47	(A)	F	Outside Gym, left, bottle filler		1.0	3.6
	(B)				1.0	3.7
48	(A)	F	Gym Corner Bottle Filler		1.0	<1.0
	(B)				1.0	<1.0

**APPENDIX B**  
**LABORATORY ANALYSIS**

March 14, 2024

Devon Rathbun  
J.S. Held  
#6 Meadow Heights Professional Park  
Collinsville, IL 62234  
TEL: (417) 300-1905  
FAX: (618) 343-3597



Illinois	100226
Illinois	1004652024-2
Kansas	E-10374
Louisiana	05002
Louisiana	05003
Oklahoma	9978

**RE:** Riverview Gardens School District-Riverview HS

**WorkOrder:** 24021623

Dear Devon Rathbun:

TEKLAB, INC received 55 samples on 2/22/2024 9:00:00 AM for the analysis presented in the following report.

Samples are analyzed on an as received basis unless otherwise requested and documented. The sample results contained in this report relate only to the requested analytes of interest as directed on the chain of custody. NELAP accredited fields of testing are indicated by the letters NELAP under the Certification column. Unless otherwise documented within this report, Teklab Inc. analyzes samples utilizing the most current methods in compliance with 40CFR. All tests are performed in the Collinsville, IL laboratory unless otherwise noted in the Case Narrative.

All quality control criteria applicable to the test methods employed for this project have been satisfactorily met and are in accordance with NELAP except where noted. The following report shall not be reproduced, except in full, without the written approval of Teklab, Inc.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,



Marvin L. Darling  
Project Manager  
(618)344-1004 ex 41  
[mdarling@teklabinc.com](mailto:mdarling@teklabinc.com)



## Report Contents

<http://www.teklabinc.com/>

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**Client:** J.S. Held

**Work Order:** 24021623

**Client Project:** Riverview Gardens School District-Riverview HS

**Report Date:** 14-Mar-24

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**This reporting package includes the following:**

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Receiving Check List	9
Chain of Custody	Appended

Client: J.S. Held

Work Order: 24021623

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

### Abbr Definition

\* Analytes on report marked with an asterisk are not NELAP accredited

CCV Continuing calibration verification is a check of a standard to determine the state of calibration of an instrument between recalibration.

CRQL A Client Requested Quantitation Limit is a reporting limit that varies according to customer request. The CRQL may not be less than the MDL.

DF Dilution factor is the dilution performed during analysis only and does not take into account any dilutions made during sample preparation. The reported result is final and includes all dilution factors.

DNI Did not ignite

DUP Laboratory duplicate is a replicate aliquot prepared under the same laboratory conditions and independently analyzed to obtain a measure of precision.

ICV Initial calibration verification is a check of a standard to determine the state of calibration of an instrument before sample analysis is initiated.

IDPH IL Dept. of Public Health

LCS Laboratory control sample is a sample matrix, free from the analytes of interest, spiked with verified known amounts of analytes and analyzed exactly like a sample to establish intra-laboratory or analyst specific precision and bias or to assess the performance of all or a portion of the measurement system.

LCSD Laboratory control sample duplicate is a replicate laboratory control sample that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).

MBLK Method blank is a sample of a matrix similar to the batch of associated sample (when available) that is free from the analytes of interest and is processed simultaneously with and under the same conditions as samples through all steps of the analytical procedures, and in which no target analytes or interferences should present at concentrations that impact the analytical results for sample analyses.

MDL "The method detection limit is defined as the minimum measured concentration of a substance that can be reported with 99% confidence that the measured concentration is distinguishable from method blank results."

MS Matrix spike is an aliquot of matrix fortified (spiked) with known quantities of specific analytes that is subjected to the entire analytical procedures in order to determine the effect of the matrix on an approved test method's recovery system. The acceptable recovery range is listed in the QC Package (provided upon request).

MSD Matrix spike duplicate means a replicate matrix spike that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).

MW Molecular weight

NC Data is not acceptable for compliance purposes

ND Not Detected at the Reporting Limit

NELAP NELAP Accredited

PQL Practical quantitation limit means the lowest level that can be reliably achieved within specified limits of precision and accuracy during routine laboratory operation conditions.

RL The reporting limit the lowest level that the data is displayed in the final report. The reporting limit may vary according to customer request or sample dilution. The reporting limit may not be less than the MDL.

RPD Relative percent difference is a calculated difference between two recoveries (ie. MS/MSD). The acceptable recovery limit is listed in the QC Package (provided upon request).

SPK The spike is a known mass of target analyte added to a blank sample or sub-sample; used to determine recovery deficiency or for other quality control purposes.

Surr Surrogates are compounds which are similar to the analytes of interest in chemical composition and behavior in the analytical process, but which are not normally found in environmental samples.

TIC Tentatively identified compound: Analytes tentatively identified in the sample by using a library search. Only results not in the calibration standard will be reported as tentatively identified compounds. Results for tentatively identified compounds that are not present in the calibration standard, but are assigned a specific chemical name based upon the library search, are calculated using total peak areas from reconstructed ion chromatograms and a response factor of one. The nearest Internal Standard is used for the calculation. The results of any TICs must be considered estimated, and are flagged with a "T". If the estimated result is above the calibration range it is flagged "ET"

TNTC Too numerous to count (> 200 CFU)

**Client:** J.S. Held

**Work Order:** 24021623

**Client Project:** Riverview Gardens School District-Riverview HS

**Report Date:** 14-Mar-24

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### Qualifiers

- |   |  |
|---|--|
| # - Unknown hydrocarbon                               | B - Analyte detected in associated Method Blank              |
| C - RL shown is a Client Requested Quantitation Limit | E - Value above quantitation range                           |
| H - Holding times exceeded                            | I - Associated internal standard was outside method criteria |
| J - Analyte detected below quantitation limits        | M - Manual Integration used to determine area response       |
| ND - Not Detected at the Reporting Limit              | R - RPD outside accepted recovery limits                     |
| S - Spike Recovery outside recovery limits            | T - TIC(Tentatively identified compound)                     |
| X - Value exceeds Maximum Contaminant Level           |  |



Client: J.S. Held

Work Order: 24021623

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

Cooler Receipt Temp: N/A °C

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**Locations**

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**Collinsville**

**Address** 5445 Horseshoe Lake Road  
Collinsville, IL 62234-7425  
**Phone** (618) 344-1004  
**Fax** (618) 344-1005  
**Email** jhriley@teklabinc.com

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**Collinsville Air**

**Address** 5445 Horseshoe Lake Road  
Collinsville, IL 62234-7425  
**Phone** (618) 344-1004  
**Fax** (618) 344-1005  
**Email** EHurley@teklabinc.com

---

**Springfield**

**Address** 3920 Pintail Dr  
Springfield, IL 62711-9415  
**Phone** (217) 698-1004  
**Fax** (217) 698-1005  
**Email** KKlostermann@teklabinc.com

---

**Chicago**

**Address** 1319 Butterfield Rd.  
Downers Grove, IL 60515  
**Phone** (630) 324-6855  
**Fax**  
**Email** arenner@teklabinc.com

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**Kansas City**

**Address** 8421 Nieman Road  
Lenexa, KS 66214  
**Phone** (913) 541-1998  
**Fax** (913) 541-1998  
**Email** jhriley@teklabinc.com



## Accreditations

<http://www.teklabinc.com/>

Client: J.S. Held

Work Order: 24021623

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

State	Dept	Cert #	NELAP	Exp Date	Lab
Illinois	IEPA	100226	NELAP	1/31/2025	Collinsville
Illinois	IEPA	1004652024-2	NELAP	4/30/2025	Collinsville
Kansas	KDHE	E-10374	NELAP	4/30/2024	Collinsville
Louisiana	LDEQ	05002	NELAP	6/30/2024	Collinsville
Louisiana	LDEQ	05003	NELAP	6/30/2024	Collinsville
Oklahoma	ODEQ	9978	NELAP	8/31/2024	Collinsville
Arkansas	ADEQ	88-0966		3/14/2024	Collinsville
Illinois	IDPH	17584		5/31/2025	Collinsville
Iowa	IDNR	430		6/1/2024	Collinsville
Kentucky	UST	0073		1/31/2025	Collinsville
Missouri	MDNR	00930		10/31/2026	Collinsville
Missouri	MDNR	930		1/31/2025	Collinsville



# Laboratory Results

<http://www.teklabinc.com/>

Client: J.S. Held

Work Order: 24021623

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

Matrix: DRINKING WATER

Sample ID	Client Sample ID	Certification	Qual	RL	Result	Units	DF	Date Analyzed	Date Collected
<b>EPA 600 4.1.4, 200.8 R5.4, METALS BY ICPMS (TOTAL)</b>									
<b>Lead</b>									
24021623-001A	01A	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 19:51	02/22/2024 5:30
24021623-002A	01B	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 19:55	02/22/2024 5:30
24021623-003A	01C	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 19:59	02/22/2024 5:30
24021623-004A	02A	NELAP		1.0	164	µg/L	5	03/08/2024 17:46	02/22/2024 5:30
24021623-005A	02B	NELAP		1.0	3.3	µg/L	1	03/11/2024 20:11	02/22/2024 5:30
24021623-006A	03A	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:03	02/22/2024 5:30
24021623-007A	03B	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:07	02/22/2024 5:30
24021623-008A	04A	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:36	02/22/2024 5:30
24021623-009A	04B	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:40	02/22/2024 5:30
24021623-010A	05A	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:44	02/22/2024 5:30
24021623-011A	05B	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 21:05	02/22/2024 5:30
24021623-012A	06A	NELAP		1.0	1.4	µg/L	5	03/08/2024 17:50	02/22/2024 5:30
24021623-013A	06B	NELAP		1.0	3.2	µg/L	5	03/08/2024 17:54	02/22/2024 5:30
24021623-014A	07A	NELAP		1.0	73.8	µg/L	5	03/08/2024 17:58	02/22/2024 5:30
24021623-015A	07B	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:48	02/22/2024 5:30
24021623-016A	08A	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:53	02/22/2024 5:30
24021623-017A	08B	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 20:57	02/22/2024 5:30
24021623-018A	09A	NELAP		1.0	< 1.0	µg/L	1	03/11/2024 21:01	02/22/2024 5:30
24021623-019A	09B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:02	02/22/2024 5:30
24021623-020A	10A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:06	02/22/2024 5:30
24021623-021A	10B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:09	02/22/2024 5:30
24021623-022A	11A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:13	02/22/2024 5:30
24021623-023A	11B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:17	02/22/2024 5:30
24021623-024A	13A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:28	02/22/2024 5:30
24021623-025A	13B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:31	02/22/2024 5:30
24021623-026A	14A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:46	02/22/2024 5:30
24021623-027A	14B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:50	02/22/2024 5:30
24021623-028A	15A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:53	02/22/2024 5:30
24021623-029A	15B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 7:57	02/22/2024 5:30
24021623-030A	16A	NELAP		1.0	< 1.0	µg/L	5	03/13/2024 15:06	02/22/2024 5:30
24021623-031A	16B	NELAP		1.0	< 1.0	µg/L	5	03/13/2024 15:10	02/22/2024 5:30
24021623-032A	17A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:01	02/22/2024 5:30
24021623-033A	17B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:04	02/22/2024 5:30
24021623-034A	18A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:08	02/22/2024 5:30
24021623-035A	18B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:12	02/22/2024 5:30
24021623-036A	19A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:34	02/22/2024 5:30
24021623-037A	19B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:37	02/22/2024 5:30
24021623-038A	20A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:41	02/22/2024 5:30
24021623-039A	20B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:45	02/22/2024 5:30
24021623-040A	21A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:48	02/22/2024 5:30
24021623-041A	21B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:52	02/22/2024 5:30
24021623-042A	22A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:56	02/22/2024 5:30
24021623-043A	22B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 8:59	02/22/2024 5:30
24021623-044A	23A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 9:21	02/22/2024 5:30
24021623-045A	23B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 9:25	02/22/2024 5:30
24021623-046A	25A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 9:29	02/22/2024 5:30
24021623-047A	25B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 9:33	02/22/2024 5:30
24021623-048A	26A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 9:36	02/22/2024 5:30



# Laboratory Results

<http://www.teklabinc.com/>

Client: J.S. Held

Work Order: 24021623

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

Matrix: DRINKING WATER

Sample ID	Client Sample ID	Certification	Qual	RL	Result	Units	DF	Date Analyzed	Date Collected
<b>EPA 600 4.1.4, 200.8 R5.4, METALS BY ICPMS (TOTAL)</b>									
<b>Lead</b>									
24021623-049A	26B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 9:40	02/22/2024 5:30
24021623-050A	27A	NELAP		1.0	2.5	µg/L	1	03/13/2024 9:56	02/22/2024 5:30
24021623-051A	27B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 10:00	02/22/2024 5:30
24021623-052A	28A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 10:17	02/22/2024 5:30
24021623-053A	28B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 10:20	02/22/2024 5:30
24021623-054A	29A	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 10:24	02/22/2024 5:30
24021623-055A	29B	NELAP		1.0	< 1.0	µg/L	1	03/13/2024 10:28	02/22/2024 5:30



# Receiving Check List

<http://www.teklabinc.com/>

Client: J.S. Held

Work Order: 24021623

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

Carrier: Devon Rathbun

Received By: EES

Completed by:

*Amber Dilallo*

Reviewed by:

*Ellie Hopkins*

On:

22-Feb-24

Amber Dilallo

On:

22-Feb-24

Ellie Hopkins

Pages to follow:

Chain of custody

Extra pages included

- Shipping container/cooler in good condition? Yes  No  Not Present  Temp °C **N/A**
- Type of thermal preservation? None  Ice  Blue Ice  Dry Ice
- Chain of custody present? Yes  No
- Chain of custody signed when relinquished and received? Yes  No
- Chain of custody agrees with sample labels? 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
- Reported field parameters measured: Field  Lab  NA
- Container/Temp Blank temperature in compliance? Yes  No

*When thermal preservation is required, samples are compliant with a temperature between 0.1°C - 6.0°C, or when samples are received on ice the same day as collected.*

- Water – at least one vial per sample has zero headspace? Yes  No  No VOA vials
- Water - TOX containers have zero headspace? Yes  No  No TOX containers
- Water - pH acceptable upon receipt? Yes  No  NA
- NPDES/CWA TCN interferences checked/treated in the field? Yes  No  NA

**Any No responses must be detailed below or on the COC.**

Samples were checked for turbidity and then preserved with nitric acid upon arrival in the laboratory.

# CHAIN OF CUSTODY

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u> Address: <u>6 Meadow Heights Professional Park</u> City/State/Zip: <u>Collinsville, IL 62234</u> Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u> Email: <u>devon.rathbun@jsheld.com</u> Fax: _____	Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE <u>NA</u> °C Preserved in: <input checked="" type="checkbox"/> LAB <input type="checkbox"/> FIELD <u>FOR LAB USE ONLY</u> LAB NOTES: _____
Client Comments: <p style="font-size: 1.2em; text-align: center;"><u>Riverview HS</u></p>	

Are these samples known to be involved in litigation? If yes, a surcharge will apply:  Yes  No  
 Are these samples known to be hazardous?  Yes  No  
 Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section:  Yes  No

PROJECT NAME/NUMBER <u>Riverview Gardens School District</u>	SAMPLE COLLECTOR'S NAME <u>Devon Rathbun</u>	# and Type of Containers	INDICATE ANALYSIS REQUESTED
---	---	--------------------------	-----------------------------

RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other <input type="checkbox"/> 3 Day (50% Surcharge)	BILLING INSTRUCTIONS
--	----------------------

Lab Use Only	Sample ID	Date/Time Sampled	Matrix	UNP	HNO3	NaOH	H2SO4	HCL	MeOH	NaHSO4	TSP	Other	Lead				
<u>24021623-001</u>	<u>01A</u>	<u>2/22/24 5:30 AM</u>	<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>002</u>	<u>01B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>003</u>	<u>01C</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>004</u>	<u>02A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>005</u>	<u>02B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>006</u>	<u>03A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>007</u>	<u>03B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>008</u>	<u>04A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>009</u>	<u>04B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>010</u>	<u>05A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				
<u>011</u>	<u>05B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>				

Relinquished By <u>Devon Rathbun</u>	Date/Time <u>2/22/24 9:00 AM</u>	Received By <u>Emily Anselmi</u>	Date/Time <u>2/22/24 9:00</u>

\*The individual signing this agreement on behalf of the client, acknowledges that he/she has read and understands the terms and conditions of this agreement, and that he/she has the authority to sign on behalf of the client. See www.teklabinc.com for terms and conditions

# CHAIN OF CUSTODY

Pg 2 of 9 Workorder # 24021623

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u> Address: <u>6 Meadow Heights Professional Park</u> City/State/Zip: <u>Collinsville, IL 62234</u> Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u> Email: <u>devon.rathbun@jsheld.com</u> Fax: _____				Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE _____ °C Preserved in: <input type="checkbox"/> LAB <input type="checkbox"/> FIELD <span style="float: right;"><u>FOR LAB USE ONLY</u></span> LAB NOTES: _____  Client Comments: _____  <p style="font-size: 1.2em; text-align: center;"><u>Riverview HS</u></p>																					
Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				PROJECT NAME/NUMBER: <u>Riverview Gardens School District</u> SAMPLE COLLECTOR'S NAME: <u>Devon Rathbun</u>																					
RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____ <input type="checkbox"/> 3 Day (50% Surcharge)			BILLING INSTRUCTIONS _____																						
Lab Use Only		Sample ID		Date/Time Sampled		Matrix		# and Type of Containers UNP HNO3 NaOH H2SO4 HCL MeOH NaHSO4 TSP Other Lead							INDICATE ANALYSIS REQUESTED										
<u>24021623</u> 012		<u>06A</u>		<u>2/22/24 5:30 AM</u>		Aqueous									✓										
013		06B		↓		Aqueous									✓										
014		07A				Aqueous									✓										
015		07B				Aqueous									✓										
016		08A				Aqueous									✓										
017		08B				Aqueous									✓										
018		09A				Aqueous									✓										
019		09B				Aqueous									✓										
020		10A				Aqueous									✓										
021		10B				Aqueous									✓										
022		11A		Aqueous									✓												
Relinquished By: <u>Devon Rathbun</u>				Date/Time: <u>2/22/24 9:00 AM</u>				Received By: <u>Emily Bachelt</u>				Date/Time: <u>2/22/24 9:00</u>													

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# CHAIN OF CUSTODY

Pg 3 of 9 Workorder # 24021623

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u>		Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE _____ °C	
Address: <u>6 Meadow Heights Professional Park</u>		Preserved in: <input type="checkbox"/> LAB <input type="checkbox"/> FELD <u>FOR LAB USE ONLY</u>	
City/State/Zip: <u>Collinsville, IL 62234</u>		LAB NOTES:	
Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u>		Client Comments:  <i>Riverview HS</i>	
Email: <u>devon.rathbun@jsheld.com</u> Fax:			
Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
PROJECT NAME/NUMBER <u>Riverview Gardens School District</u>		SAMPLE COLLECTOR'S NAME <u>Devon Rathbun</u>	
RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____ <input type="checkbox"/> 3 Day (50% Surcharge)		BILLING INSTRUCTIONS	
# and Type of Containers			
INDICATE ANALYSIS REQUESTED			
UNP	HNO3	NaOH	H2SO4
HCL	MeOH	NaHSO4	TSP
Other	Lead		
Lab Use Only	Sample ID	Date/Time Sampled	Matrix
<u>24021623</u>	<u>11B</u>	<u>2/22/24 5:30 AM</u>	Aqueous
<u>024</u>	<u>13A</u>		Aqueous
<u>025</u>	<u>13B</u>		Aqueous
<u>026</u>	<u>14A</u>		Aqueous
<u>027</u>	<u>14B</u>		Aqueous
<u>028</u>	<u>15A</u>		Aqueous
<u>029</u>	<u>15B</u>		Aqueous
<u>030</u>	<u>16A</u>		Aqueous
<u>031</u>	<u>16B</u>		Aqueous
<u>032</u>	<u>17A</u>		Aqueous
<u>033</u>	<u>17B</u>		Aqueous
Relinquished By		Date/Time	
<u>Devon Rathbun</u>		<u>2/22/24 9:00 AM</u>	
Received By		Date/Time	
<u>Emily Sackett</u>		<u>2/22/24 9:00</u>	

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# CHAIN OF CUSTODY

Pg 4 of 9 Workorder # 24021623

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u> Address: <u>6 Meadow Heights Professional Park</u> City/State/Zip: <u>Collinsville, IL 62234</u> Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u> Email: <u>devon.rathbun@jsheld.com</u> Fax: _____				Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE _____ °C Preserved in: <input type="checkbox"/> LAB <input type="checkbox"/> FIELD <u>FOR LAB USE ONLY</u> LAB NOTES: _____					
Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Client Comments:  <div style="font-size: 1.2em; font-family: cursive;">Riverview HS</div>					
PROJECT NAME/NUMBER <u>Riverview Gardens School District</u>		SAMPLE COLLECTOR'S NAME <div style="font-size: 1.2em; font-family: cursive;">Devon Rathbun</div>		# and Type of Containers		INDICATE ANALYSIS REQUESTED			
RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____ <input type="checkbox"/> 3 Day (50% Surcharge)				BILLING INSTRUCTIONS					
Lab Use Only		Sample ID		Date/Time Sampled		Matrix			
<u>24021623</u> <u>021</u>		<u>18A</u>		<u>2/22/24 5:30 AM</u>		Aqueous			
<u>035</u>		<u>18B</u>		↓		Aqueous			
<u>036</u>		<u>19A</u>		↓		Aqueous			
<u>037</u>		<u>19B</u>		↓		Aqueous			
<u>038</u>		<u>20A</u>		↓		Aqueous			
<u>039</u>		<u>20B</u>		↓		Aqueous			
<u>040</u>		<u>21A</u>		↓		Aqueous			
<u>041</u>		<u>21B</u>		↓		Aqueous			
<u>042</u>		<u>22A</u>		↓		Aqueous			
<u>043</u>		<u>22B</u>		↓		Aqueous			
<u>044</u>		<u>23A</u>		↓		Aqueous			
Relinquished By <div style="font-size: 1.2em; font-family: cursive;">Devon Rathbun</div>				Date/Time <u>2/22/24 9:00 AM</u>		Received By <div style="font-size: 1.2em; font-family: cursive;">Emily Sackett</div>		Date/Time <u>2/22/24 9:00</u>	

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**CHAIN OF CUSTODY**

Pg 5 of 9 Workorder # 24021623

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u>	Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE _____ °C
Address: <u>6 Meadow Heights Professional Park</u>	Preserved in: <input type="checkbox"/> LAB <input type="checkbox"/> FIELD <u>FOR LAB USE ONLY</u>
City/State/Zip: <u>Collinsville, IL 62234</u>	LAB NOTES:
Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u>	

Email: <u>devon.rathbun@jsheld.com</u> Fax:	Client Comments: <u>Riverview HS</u>
Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

PROJECT NAME/NUMBER	SAMPLE COLLECTOR'S NAME	# and Type of Containers	INDICATE ANALYSIS REQUESTED										
<u>Riverview Gardens School District</u>	<u>Devon Rathbun</u>												

RESULTS REQUESTED	BILLING INSTRUCTIONS
<input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____ <input type="checkbox"/> 3 Day (50% Surcharge)	

Lab Use Only	Sample ID	Date/Time Sampled	Matrix	UNP	HNO3	NaOH	H2SO4	HCL	MeOH	NaHSO4	TSP	Other	Lead							
<u>24021623-045</u>	<u>23B</u>	<u>2/22/24 5:30 AM</u>	<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>046</u>	<u>25A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>047</u>	<u>25B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>048</u>	<u>26A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>049</u>	<u>26B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>050</u>	<u>27A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>051</u>	<u>27B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>052</u>	<u>28A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>053</u>	<u>28B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>054</u>	<u>29A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>055</u>	<u>29B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							

Relinquished By	Date/Time	Received By	Date/Time
<u>Devon Rathbun</u>	<u>2/22/24 9:00 AM</u>	<u>Emily Sackett</u>	<u>2/22/24 9:00</u>

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March 14, 2024

Devon Rathbun  
J.S. Held  
#6 Meadow Heights Professional Park  
Collinsville, IL 62234  
TEL: (417) 300-1905  
FAX: (618) 343-3597



Illinois	100226
Illinois	1004652024-2
Kansas	E-10374
Louisiana	05002
Louisiana	05003
Oklahoma	9978

**RE:** Riverview Gardens School District-Riverview HS

**WorkOrder:** 24021624

Dear Devon Rathbun:

TEKLAB, INC received 34 samples on 2/22/2024 9:00:00 AM for the analysis presented in the following report.

Samples are analyzed on an as received basis unless otherwise requested and documented. The sample results contained in this report relate only to the requested analytes of interest as directed on the chain of custody. NELAP accredited fields of testing are indicated by the letters NELAP under the Certification column. Unless otherwise documented within this report, Teklab Inc. analyzes samples utilizing the most current methods in compliance with 40CFR. All tests are performed in the Collinsville, IL laboratory unless otherwise noted in the Case Narrative.

All quality control criteria applicable to the test methods employed for this project have been satisfactorily met and are in accordance with NELAP except where noted. The following report shall not be reproduced, except in full, without the written approval of Teklab, Inc.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,



Marvin L. Darling  
Project Manager  
(618)344-1004 ex 41  
[mdarling@teklabinc.com](mailto:mdarling@teklabinc.com)



## Report Contents

<http://www.teklabinc.com/>

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**Client:** J.S. Held

**Work Order:** 24021624

**Client Project:** Riverview Gardens School District-Riverview HS

**Report Date:** 14-Mar-24

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**This reporting package includes the following:**

Cover Letter	1
Report Contents	2
Definitions	3
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Accreditations	6
Laboratory Results	7
Receiving Check List	8
Chain of Custody	Appended

Client: J.S. Held

Work Order: 24021624

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

### Abbr Definition

\* Analytes on report marked with an asterisk are not NELAP accredited

CCV Continuing calibration verification is a check of a standard to determine the state of calibration of an instrument between recalibration.

CRQL A Client Requested Quantitation Limit is a reporting limit that varies according to customer request. The CRQL may not be less than the MDL.

DF Dilution factor is the dilution performed during analysis only and does not take into account any dilutions made during sample preparation. The reported result is final and includes all dilution factors.

DNI Did not ignite

DUP Laboratory duplicate is a replicate aliquot prepared under the same laboratory conditions and independently analyzed to obtain a measure of precision.

ICV Initial calibration verification is a check of a standard to determine the state of calibration of an instrument before sample analysis is initiated.

IDPH IL Dept. of Public Health

LCS Laboratory control sample is a sample matrix, free from the analytes of interest, spiked with verified known amounts of analytes and analyzed exactly like a sample to establish intra-laboratory or analyst specific precision and bias or to assess the performance of all or a portion of the measurement system.

LCSD Laboratory control sample duplicate is a replicate laboratory control sample that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).

MBLK Method blank is a sample of a matrix similar to the batch of associated sample (when available) that is free from the analytes of interest and is processed simultaneously with and under the same conditions as samples through all steps of the analytical procedures, and in which no target analytes or interferences should present at concentrations that impact the analytical results for sample analyses.

MDL "The method detection limit is defined as the minimum measured concentration of a substance that can be reported with 99% confidence that the measured concentration is distinguishable from method blank results."

MS Matrix spike is an aliquot of matrix fortified (spiked) with known quantities of specific analytes that is subjected to the entire analytical procedures in order to determine the effect of the matrix on an approved test method's recovery system. The acceptable recovery range is listed in the QC Package (provided upon request).

MSD Matrix spike duplicate means a replicate matrix spike that is prepared and analyzed in order to determine the precision of the approved test method. The acceptable recovery range is listed in the QC Package (provided upon request).

MW Molecular weight

NC Data is not acceptable for compliance purposes

ND Not Detected at the Reporting Limit

NELAP NELAP Accredited

PQL Practical quantitation limit means the lowest level that can be reliably achieved within specified limits of precision and accuracy during routine laboratory operation conditions.

RL The reporting limit the lowest level that the data is displayed in the final report. The reporting limit may vary according to customer request or sample dilution. The reporting limit may not be less than the MDL.

RPD Relative percent difference is a calculated difference between two recoveries (ie. MS/MSD). The acceptable recovery limit is listed in the QC Package (provided upon request).

SPK The spike is a known mass of target analyte added to a blank sample or sub-sample; used to determine recovery deficiency or for other quality control purposes.

Surr Surrogates are compounds which are similar to the analytes of interest in chemical composition and behavior in the analytical process, but which are not normally found in environmental samples.

TIC Tentatively identified compound: Analytes tentatively identified in the sample by using a library search. Only results not in the calibration standard will be reported as tentatively identified compounds. Results for tentatively identified compounds that are not present in the calibration standard, but are assigned a specific chemical name based upon the library search, are calculated using total peak areas from reconstructed ion chromatograms and a response factor of one. The nearest Internal Standard is used for the calculation. The results of any TICs must be considered estimated, and are flagged with a "T". If the estimated result is above the calibration range it is flagged "ET"

TNTC Too numerous to count (> 200 CFU)

**Client:** J.S. Held

**Work Order:** 24021624

**Client Project:** Riverview Gardens School District-Riverview HS

**Report Date:** 14-Mar-24

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### Qualifiers

- |   |  |
|---|--|
| # - Unknown hydrocarbon                               | B - Analyte detected in associated Method Blank              |
| C - RL shown is a Client Requested Quantitation Limit | E - Value above quantitation range                           |
| H - Holding times exceeded                            | I - Associated internal standard was outside method criteria |
| J - Analyte detected below quantitation limits        | M - Manual Integration used to determine area response       |
| ND - Not Detected at the Reporting Limit              | R - RPD outside accepted recovery limits                     |
| S - Spike Recovery outside recovery limits            | T - TIC(Tentatively identified compound)                     |
| X - Value exceeds Maximum Contaminant Level           |  |



## Case Narrative

<http://www.teklabinc.com/>

**Client:** J.S. Held

**Work Order:** 24021624

**Client Project:** Riverview Gardens School District-Riverview HS

**Report Date:** 14-Mar-24

**Cooler Receipt Temp:** N/A °C

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### Locations

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#### Collinsville

**Address** 5445 Horseshoe Lake Road  
Collinsville, IL 62234-7425  
**Phone** (618) 344-1004  
**Fax** (618) 344-1005  
**Email** jhriley@teklabinc.com

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#### Collinsville Air

**Address** 5445 Horseshoe Lake Road  
Collinsville, IL 62234-7425  
**Phone** (618) 344-1004  
**Fax** (618) 344-1005  
**Email** EHurley@teklabinc.com

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#### Springfield

**Address** 3920 Pintail Dr  
Springfield, IL 62711-9415  
**Phone** (217) 698-1004  
**Fax** (217) 698-1005  
**Email** KKlostermann@teklabinc.com

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#### Chicago

**Address** 1319 Butterfield Rd.  
Downers Grove, IL 60515  
**Phone** (630) 324-6855  
**Fax**  
**Email** arenner@teklabinc.com

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#### Kansas City

**Address** 8421 Nieman Road  
Lenexa, KS 66214  
**Phone** (913) 541-1998  
**Fax** (913) 541-1998  
**Email** jhriley@teklabinc.com



## Accreditations

<http://www.teklabinc.com/>

Client: J.S. Held

Work Order: 24021624

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

State	Dept	Cert #	NELAP	Exp Date	Lab
Illinois	IEPA	100226	NELAP	1/31/2025	Collinsville
Illinois	IEPA	1004652024-2	NELAP	4/30/2025	Collinsville
Kansas	KDHE	E-10374	NELAP	4/30/2024	Collinsville
Louisiana	LDEQ	05002	NELAP	6/30/2024	Collinsville
Louisiana	LDEQ	05003	NELAP	6/30/2024	Collinsville
Oklahoma	ODEQ	9978	NELAP	8/31/2024	Collinsville
Arkansas	ADEQ	88-0966		3/14/2024	Collinsville
Illinois	IDPH	17584		5/31/2025	Collinsville
Iowa	IDNR	430		6/1/2024	Collinsville
Kentucky	UST	0073		1/31/2025	Collinsville
Missouri	MDNR	00930		10/31/2026	Collinsville
Missouri	MDNR	930		1/31/2025	Collinsville





# Laboratory Results

<http://www.teklabinc.com/>

Client: J.S. Held

Work Order: 24021624

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

Matrix: DRINKING WATER

Sample ID	Client Sample ID	Certification	Qual	RL	Result	Units	DF	Date Analyzed	Date Collected
<b>EPA 600 4.1.4, 200.8 R5.4, METALS BY ICPMS (TOTAL)</b>									
<b>Lead</b>									
24021624-001A	30A	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 9:47	02/22/2024 5:30
24021624-002A	30B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 9:51	02/22/2024 5:30
24021624-003A	31A	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 9:55	02/22/2024 5:30
24021624-004A	31B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 9:59	02/22/2024 5:30
24021624-005A	32A	NELAP		1.0	10.3	µg/L	1	03/12/2024 10:03	02/22/2024 5:30
24021624-006A	32B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 10:07	02/22/2024 5:30
24021624-007A	33A	NELAP		10.0	188	µg/L	10	03/12/2024 10:41	02/22/2024 5:30
24021624-008A	33B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 10:15	02/22/2024 5:30
24021624-009A	34A	NELAP		1.0	4.6	µg/L	1	03/12/2024 10:19	02/22/2024 5:30
24021624-010A	34B	NELAP		1.0	1.6	µg/L	1	03/12/2024 11:10	02/22/2024 5:30
24021624-011A	35A	NELAP		1.0	11.2	µg/L	1	03/12/2024 10:49	02/22/2024 5:30
24021624-012A	35B	NELAP		1.0	1.4	µg/L	1	03/12/2024 10:53	02/22/2024 5:30
24021624-013A	36A	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 10:57	02/22/2024 5:30
24021624-014A	36B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 15:12	02/22/2024 5:30
24021624-015A	37A	NELAP		1.0	1.5	µg/L	1	03/12/2024 15:16	02/22/2024 5:30
24021624-016A	37B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 15:20	02/22/2024 5:30
24021624-017A	39A	NELAP		1.0	56.2	µg/L	1	03/12/2024 15:24	02/22/2024 5:30
24021624-018A	39B	NELAP		1.0	20.2	µg/L	5	03/13/2024 13:53	02/22/2024 5:30
24021624-019A	40A	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 15:40	02/22/2024 5:30
24021624-020A	40B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 15:28	02/22/2024 5:30
24021624-021A	41A	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 15:32	02/22/2024 5:30
24021624-022A	41B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 15:36	02/22/2024 5:30
24021624-023A	43A	NELAP		1.0	< 1.0	µg/L	1	03/14/2024 7:33	02/22/2024 5:30
24021624-024A	43B	NELAP		1.0	< 1.0	µg/L	1	03/14/2024 7:37	02/22/2024 5:30
24021624-025A	44A	NELAP		1.0	< 1.0	µg/L	1	03/14/2024 8:11	02/22/2024 5:30
24021624-026A	44B	NELAP		1.0	< 1.0	µg/L	1	03/14/2024 8:15	02/22/2024 5:30
24021624-027A	45A	NELAP		1.0	1.3	µg/L	1	03/14/2024 8:20	02/22/2024 5:30
24021624-028A	45B	NELAP		1.0	3.4	µg/L	1	03/14/2024 8:24	02/22/2024 5:30
24021624-029A	46A	NELAP		1.0	< 1.0	µg/L	1	03/14/2024 10:41	02/22/2024 5:30
24021624-030A	46B	NELAP		1.0	< 1.0	µg/L	1	03/14/2024 8:28	02/22/2024 5:30
24021624-031A	47A	NELAP		1.0	3.6	µg/L	1	03/14/2024 8:32	02/22/2024 5:30
24021624-032A	47B	NELAP		1.0	3.7	µg/L	1	03/14/2024 9:35	02/22/2024 5:30
24021624-033A	48A	NELAP		1.0	< 1.0	µg/L	1	03/14/2024 9:30	02/22/2024 5:30
24021624-034A	48B	NELAP		1.0	< 1.0	µg/L	1	03/12/2024 11:01	02/22/2024 5:30



# Receiving Check List

<http://www.teklabinc.com/>

Client: J.S. Held

Work Order: 24021624

Client Project: Riverview Gardens School District-Riverview HS

Report Date: 14-Mar-24

Carrier: Devon Rathbun

Received By: EES

Completed by:

*Amber Dilallo*

Reviewed by:

*Ellie Hopkins*

On:

22-Feb-24

Amber Dilallo

On:

22-Feb-24

Ellie Hopkins

Pages to follow:

Chain of custody

Extra pages included

- |   |  |                              |                                      |                                     |                          |
|---|--|------------------------------|--------------------------------------|-------------------------------------|--------------------------|
| Shipping container/cooler in good condition?            | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  | Not Present <input type="checkbox"/> | Temp °C                             | N/A                      |
| Type of thermal preservation?                           | None <input checked="" type="checkbox"/> | Ice <input type="checkbox"/> | Blue Ice <input type="checkbox"/>    | Dry Ice                             | <input type="checkbox"/> |
| Chain of custody present?                               | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |
| Chain of custody signed when relinquished and received? | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |
| Chain of custody agrees with sample labels?             | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |
| Samples in proper container/bottle?                     | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |
| Sample containers intact?                               | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |
| Sufficient sample volume for indicated test?            | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |
| All samples received within holding time?               | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |
| Reported field parameters measured:                     | Field <input type="checkbox"/>           | Lab <input type="checkbox"/> | NA                                   | <input checked="" type="checkbox"/> |                          |
| Container/Temp Blank temperature in compliance?         | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>  |                                      |                                     |                          |

*When thermal preservation is required, samples are compliant with a temperature between 0.1°C - 6.0°C, or when samples are received on ice the same day as collected.*

- |   |   |                             |                   |                                     |
|---|---|-----------------------------|-------------------|-------------------------------------|
| Water – at least one vial per sample has zero headspace?  | Yes <input type="checkbox"/>            | No <input type="checkbox"/> | No VOA vials      | <input checked="" type="checkbox"/> |
| Water - TOX containers have zero headspace?               | Yes <input type="checkbox"/>            | No <input type="checkbox"/> | No TOX containers | <input checked="" type="checkbox"/> |
| Water - pH acceptable upon receipt?                       | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | NA                | <input type="checkbox"/>            |
| NPDES/CWA TCN interferences checked/treated in the field? | Yes <input type="checkbox"/>            | No <input type="checkbox"/> | NA                | <input checked="" type="checkbox"/> |

**Any No responses must be detailed below or on the COC.**

Samples were checked for turbidity and then preserved with nitric acid upon arrival in the laboratory.

# CHAIN OF CUSTODY

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u> Address: <u>6 Meadow Heights Professional Park</u> City/State/Zip: <u>Collinsville, IL 62234</u> Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u> Email: <u>devon.rathbun@jsheld.com</u> Fax: _____				Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE <u>NA</u> °C Preserved in: <input checked="" type="checkbox"/> LAB <input type="checkbox"/> FIELD <b>FOR LAB USE ONLY</b> LAB NOTES: _____																	
Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Client Comments:  <div style="font-size: 24px; font-family: cursive;">Riverview HS</div>																	
PROJECT NAME/NUMBER <u>Riverview Gardens School District</u>		SAMPLE COLLECTOR'S NAME <div style="font-size: 24px; font-family: cursive;">Devon Rathbun</div>		# and Type of Containers		INDICATE ANALYSIS REQUESTED															
RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other <input type="checkbox"/> 3 Day (50% Surcharge)		BILLING INSTRUCTIONS		UNP	HNO3	NaOH	H2SO4	HCL	MeOH	NaHSO4	TSP	Other	Lead								
Lab Use Only	Sample ID	Date/Time Sampled	Matrix																		
<u>24021624-001</u>	<u>30A</u>	<u>7/22/24 5:30 AM</u>	<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>002</u>	<u>30B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>003</u>	<u>31A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>004</u>	<u>31B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>005</u>	<u>32A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>006</u>	<u>32B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>007</u>	<u>33A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>008</u>	<u>33B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>009</u>	<u>34A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>010</u>	<u>34B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
<u>011</u>	<u>35A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>								
Relinquished By <u>Devon Rathbun</u>		Date/Time <u>7/22/24 9:00 AM</u>		Received By <div style="font-size: 24px; font-family: cursive;">Emily Sackett</div>		Date/Time <u>7/22/24 9:00</u>															

\*The individual signing this agreement on behalf of the client, acknowledges that he/she has read and understands the terms and conditions of this agreement, and that he/she has the authority to sign on behalf of the client. See www.teklabinc.com for terms and conditions

# CHAIN OF CUSTODY

Pg 7 of 9 Workorder # 24021624

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u> Address: <u>6 Meadow Heights Professional Park</u> City/State/Zip: <u>Collinsville, IL 62234</u> Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u> Email: <u>devon.rathbun@jsheld.com</u> Fax: _____	Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE _____ °C Preserved in: <input type="checkbox"/> LAB <input type="checkbox"/> FIELD <u>FOR LAB USE ONLY</u> LAB NOTES: _____
--	---

Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Client Comments: <p style="font-size: 1.2em; margin-top: 10px;"><i>Riverview HS</i></p>
--	--

PROJECT NAME/NUMBER <u>Riverview Gardens School District</u>	SAMPLE COLLECTOR'S NAME <u>Devon Rathbun</u>	# and Type of Containers	INDICATE ANALYSIS REQUESTED
---	---	--------------------------	-----------------------------

RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____ <input type="checkbox"/> 3 Day (50% Surcharge)	BILLING INSTRUCTIONS _____
--	-------------------------------

Lab Use Only	Sample ID	Date/Time Sampled	Matrix	UNP	HNO3	NaOH	H2SO4	HCL	MeOH	NaHSO4	TSP	Other	Lead							
<u>24021624 012</u>	<u>35B</u>	<u>2/22/24 5:30 AM</u>	<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>013</u>	<u>36A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>014</u>	<u>36B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>015</u>	<u>37A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>016</u>	<u>37B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>017</u>	<u>39A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>018</u>	<u>39B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>019</u>	<u>40A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>020</u>	<u>40B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>021</u>	<u>41A</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							
<u>022</u>	<u>41B</u>		<u>Aqueous</u>										<input checked="" type="checkbox"/>							

Relinquished By <u>Devon Rathbun</u>	Date/Time <u>2/22/24 9:00 AM</u>	Received By <u>Emily Sackett</u>	Date/Time <u>2/22/24 9:00</u>

\*The individual signing this agreement on behalf of the client, acknowledges that he/she has read and understands the terms and conditions of this agreement, and that he/she has the authority to sign on behalf of the client. See [www.teklabinc.com](http://www.teklabinc.com) for terms and conditions

# CHAIN OF CUSTODY

Pg 8 of 9 Workorder # 24021624

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u> Address: <u>6 Meadow Heights Professional Park</u> City/State/Zip: <u>Collinsville, IL 62234</u> Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u> Email: <u>devon.rathbun@jsheld.com</u> Fax: _____				Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE _____ °C Preserved in: <input type="checkbox"/> LAB <input type="checkbox"/> FIELD <u>FOR LAB USE ONLY</u> LAB NOTES: _____																			
Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Client Comments: <p style="font-size: 1.2em; margin-left: 20px;">Riverview HS</p>																			
PROJECT NAME/NUMBER <u>Riverview Gardens School District</u>		SAMPLE COLLECTOR'S NAME <u>Devon Rathbun</u>		# and Type of Containers		INDICATE ANALYSIS REQUESTED																	
RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____ <input type="checkbox"/> 3 Day (50% Surcharge)				BILLING INSTRUCTIONS																			
Lab Use Only	Sample ID	Date/Time Sampled		Matrix	UMP	HNO3	NaOH	H2SO4	HCL	MeOH	NaHSO4	TSP	Other	Lead									
<u>24021624-023</u>	<u>43A</u>	<u>2/22/24 5:30 AM</u>		Aqueous										<input checked="" type="checkbox"/>									
<u>024</u>	<u>43B</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>025</u>	<u>44A</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>026</u>	<u>44B</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>027</u>	<u>45A</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>028</u>	<u>45B</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>029</u>	<u>46A</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>030</u>	<u>46B</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>031</u>	<u>47A</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>032</u>	<u>47B</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
<u>033</u>	<u>48A</u>	↓		Aqueous										<input checked="" type="checkbox"/>									
Relinquished By <u>Devon Rathbun</u>				Date/Time <u>2/22/24 9:00 AM</u>		Received By <u>Emily Sackell</u>				Date/Time <u>2/22/24 9:00</u>													

\*The individual signing this agreement on behalf of the client, acknowledges that he/she has read and understands the terms and conditions of this agreement, and that he/she has the authority to sign on behalf of the client. See www.teklabinc.com for terms and conditions

## CHAIN OF CUSTODY

Pg 4 of 9 Workorder # 24021024

TEKLAB INC, 5445 Horseshoe Lake Road, Collinsville, IL 62234 Phone (618) 344-1004 Fax (618) 344-1005

Client: <u>J.S. Held</u> Address: <u>6 Meadow Heights Professional Park</u> City/State/Zip: <u>Collinsville, IL 62234</u> Contact: <u>Devon Rathbun</u> Phone: <u>417-300-1905</u> Email: <u>devon.rathbun@jsheld.com</u> Fax:	Samples on: <input type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input checked="" type="checkbox"/> NO ICE _____ °C Preserved in: <input type="checkbox"/> LAB <input type="checkbox"/> FIELD <u>FOR LAB USE ONLY</u> LAB NOTES:
--	---

Are these samples known to be involved in litigation? If yes, a surcharge will apply: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there any required reporting limits to be met on the requested analysis?. If yes, please provide limits in the comment section: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Client Comments:  <p style="font-size: 24px; text-align: center;">Riverview HS</p>
--	--

PROJECT NAME/NUMBER <u>Riverview Gardens School District</u>	SAMPLE COLLECTOR'S NAME <u>Devon Rathbun</u>	# and Type of Containers	INDICATE ANALYSIS REQUESTED
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RESULTS REQUESTED <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____ <input type="checkbox"/> 3 Day (50% Surcharge)	BILLING INSTRUCTIONS
--	----------------------

Lab Use Only	Sample ID	Date/Time Sampled	Matrix	UNP	HNO3	NaOH	H2SO4	HCL	MeOH	NaHSO4	TSP	Other	Lead	INDICATE ANALYSIS REQUESTED														
<u>24021024 031</u>	<u>48 B</u>	<u>2/22/24 5:30 AM</u>	<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															
			<u>Aqueous</u>										<input checked="" type="checkbox"/>															

Relinquished By <u>Devon Rathbun</u>	Date/Time <u>2/22/24 9:00 AM</u>	Received By <u>Emelija Sackitt</u>	Date/Time <u>2/22/24 9:00</u>

\*The individual signing this agreement on behalf of the client, acknowledges that he/she has read and understands the terms and conditions of this agreement, and that he/she has the authority to sign on behalf of the client. See www.teklabinc.com for terms and conditions

**APPENDIX C**  
**CREDENTIALS**

**STATE OF MISSOURI**  
**DEPARTMENT OF HEALTH AND SENIOR SERVICES**

**LEAD OCCUPATION LICENSE REGISTRATION**

Issued to:

**Anthony W. Hagerty**

The person, firm or corporation whose name appears on this certificate has fulfilled the requirements for licensure as set forth in the Missouri Revised Statutes 701.300-701.338, as long as not suspended or revoked, and is hereby authorized to engage in the activity listed below.

**Lead Risk Assessor**  
Category of License

Issuance Date: **10/17/2022**  
Expiration Date: **10/31/2024**  
License Number: **161031-300005062**



*Paula F. Nickelson*

Paula F. Nickelson  
Acting Director  
Department of Health and Senior Services

Lead Licensing Program, PO Box 570, Jefferson City, MO 65102





**SAINT LOUIS UNIVERSITY**  
**CENTER FOR ENVIRONMENTAL  
EDUCATION AND TRAINING**

verifies that

**Anthony Hagerty**

5249 Miami Street, St. Louis, MO 63139

has attended 8 contact hours of training and successfully passed examination for

**Lead Risk Assessor Refresher**

St. Louis, MO

Certificate # CEET 32512/11/2023 193536  
Examination Date: 12/11/2023  
CEUs: 0.8

Rene Dulle, MBA, Director  
Center for Environmental Education & Training

Center for Environmental Education and Training | 3545 Lafayette Ave., St. Louis, MO 63104  
(314) 977-8256 | [slu.edu/public-health-social-justice/centers-institutes/ceet.php](http://slu.edu/public-health-social-justice/centers-institutes/ceet.php)

The training course has been accredited by the Missouri Dept. of Health and Senior Services, and by the Illinois Dept. of Public Health. Certificate expiration is 3 years from examination date for Illinois Dept. of Public Health.

**State of Missouri**  
**Department of Natural Resources**

**Certificate of Approval**  
**for Chemical Laboratory Service**

This is to certify that

**Teklab, Incorporated**

is hereby approved to perform the analysis of drinking water as specified on the  
Certified Parameter List, which must accompany this certificate to be valid.

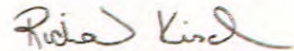
Certification Number 930

Date Issued December 13, 2021

Expiration Date January 31, 2025



Laboratory Certification Authority, Public Drinking Water Branch  
Missouri Department of Natural Resources



Laboratory Certification Officer, Environmental Services Program  
Missouri Department of Natural Resources

MISSOURI DEPARTMENT OF NATURAL RESOURCES  
DRINKING WATER LABORATORY  
CERTIFIED PARAMETER LIST

This is to certify that

Teklab, Incorporated

located at

5445 Horseshoe Lake Road, Collinsville, IL 62234

has been approved to perform the indicated procedures on drinking water under the Missouri Public Drinking Water Regulations (10 CSR 60-5.020). Specific method numbers or references are included in parenthesis when appropriate.

**INORGANIC**

**EPA 335.4**  
Total Cyanide

**EPA 353.2**  
Nitrate, Nitrite, Total Nitrate and Nitrite

**EPA 245.1**  
Mercury

**EPA 200.7**  
Barium, Beryllium, Cadmium, Chromium, Copper, Nickel

**EPA 200.8**  
Antimony, Arsenic, Barium, Beryllium, Cadmium, Chromium, Copper, Lead, Nickel,  
Selenium, Thallium

**SM4500F-C**  
Fluoride

**SM4500NO2-B**  
Nitrite

**Teklab, Incorporated**  
**Expiration Date: January 31, 2025**  
**Missouri Certificate No.: 930**  
**Original Certifying State: Illinois**