#### SAMPLE ACKNOWLEDGEMENT



2218 Railroad Avenue Redding, CA 96001-2504 (530) 243-7234

Report To:

**BREESE II WATER SYSTEM** 

AUTUMN WALKER PO Box 9062

RED BLUFF, CA 96080

**Phone:** 530-209-2748

Email: breesewater@gmail.com

Invoice To:

28-100059

BREESE II WATER SYSTEM

AUTUMN WALKER PO Box 9062

RED BLUFF, CA 96080

Phone: 530-209-2748

Email: breesewater@gmail.com

Pace Project Manager: Nikki Aceituno

(530) 243-7234

reddingclientservices@pacelabs.com

Client Project ID: [none] Pace Analytical Project ID: 25F0275

 Samples Received:
 06/11/2025 14:11 PM

 Estimated Completion:
 06/26/2025 23:00 PM

CC:

Client PO#:

Client Specified QC Sample(s):

Customer Sample ID	Pace Analytical Lab ID	Matrix	Date/Time Collected	Method
120 GURNSEY DRIVE	25F0275-01	Drinking Water	06/11/2025 07:20 AM	Fees Only Route Sampling Fee SM 9223 B Colilert-18 Colilert-18 Total Coliform & E.coli P/A
WELL 1	25F0275-02	Raw Water	06/11/2025 07:31 AM	SM 9223 B Colilert-18 Total Coliform / E.coli. Quantitray - Colilert-18
WELL 1	25F0275-03	Raw Water	06/11/2025 07:31 AM	EDD EDT - CLIP EPA 300.0 Nitrate 300.0, Nitrite 300.0

Please contact your project manager if you recognize any discrepancy in this form or have any questions about your project.

Confidentiality Statement: The Parties agree that they will take all reasonable precatuions to prevent the unauthorized disclosure of any proprietary or confidential information of each other and that they will not disclose such information except to those employees, subcontractors, or agents who have expressly agreed to maintain confidentiality.



## **SAMPLE ACKNOWLEDGEMENT**

## **Analyte List**

Customer Sample ID	Method	Compound	MRL	Units
120 GURNSEY DRIVE	SM 9223 B Colilert-18	E. Coli		Present/Absent
		Total Coliforms		Present/Absent
WELL 1		E. Coli	1	MPN/100 ml
		Total Coliforms	1	MPN/100 ml
	EPA 300.0	Nitrate as N	0.1	mg/l
		Nitrite as N	0.1	mg/l

State   Market   Ma	7 ACE	יי אוורקו וי	- CHAIN OF COSTOUT	7 5	DKINKING WATER	(FUR DRINKING WATER - MICROBIOLOGY)			170	ンナクリング	7		
EEDE   WATER SYSTEM		Morrow Lane, \$	ue, nedairig, CA 9500. Suite F Chico, CA 959:	2	ົ ທ	13-7494 894-5143			J Page	٦	2 -	5	
Controlled   Con	CLIENT NAM			1		IAME	PROJECT	PWS # (If	Applicable)	-	-	7	a
Note   1999	BREE	SE II WA	TER SYSTEM		DRINKIN	G WATER MONITORING		5	200008	3 TEHA	MA	7	၁ <b>၁</b>
ELUE   CA 96080   Accounted positive results   Propose 530-203-2748   Propose 530-203-274	MAILING ADI PO BOX	DRESS 9062			Contact for positive res		Email Entries		RN AROUNE	TIME REQU	ESTED	Ţ.	
Fig. 2016   Part   Pa	RED BLL	JFF, CA 9608	30		Phone: 530-209-27		Walker		1	ANALYSE	S REQUES	TED	
Palmer SOUNE BUTLER	INVOICE TO				Alt. contact for positive		7-0170	<u> </u>	(¬/ճա)	(ve	/6-		
Colifor   Colombia   Colombi	SPECIAL INS	TRUCTIONS / P.	#0		Phone: 530-736-594 Weekend contact for po	tive results:	water@gmail.com			ilos .	***************************************		
Collicio   Date   Sample   Date   Sample   Date	CC REP	ORTS TO I	MIKE BUTLER		Mike Butle 530-680-7	1	DRY AGENCY a Co Envrionmental Health	****		∃\smno			
06/1/37	ID# (Lab Use Only)	DATE SAMPLED	············	<b>—</b>	Grab	ATION / IDENTIFICATION / ESCRIPTION	REGULATORY ID / SOURCE CODE (if Applicable)	•		Total Colif			
1		0/1130	MA 021	-	120 Gurnsey Dri	Ae .		1	ļ		+		-
Colifor   Coli		12/190		5A	Well 1		CA5200008_001_001	1	000	>			+
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ED BY: (blease print) Michael Herzier / Pace Analytical - Reading Luther / Pace Analyt			AM PM										
Aw Pw   Aw P			AM PM										ļ
ED BY: (please print) Michael Hetzler / Pace Analytical - Redding  2UISHED DATE / TIME: 06 1/12/ H/1/  WITHOUTH PER AUTHORIZATION  WED BY  WED  WED  WED  WED  WED  WED  WED  WE			AM PM										╀-
SAMPLING FALSE pint) Michael Hetzler / Pace Analytical - Redding   SAMPLING FANALYSIS COMMENTS    Total Coliform/E. coli method used is SM 9223B, unless otherwise noted.   14/1   Total Coliform/E. coli method used is SM 9223B, unless otherwise noted.   14/1   SIGNATURE   SIGNATURE   SIGNATURE   RELINQUISHED BY   DATETIME   RELINQUISHED BY   DATETIME   RELINQUISHED BY   DATETIME   DATETIME   LOGGED BY LAB   CALLY ONLY   STATEME   CALLY ONLY			AM PM				The state of the s						
AGREEMENT TIME: OF ITCL  THIP  PER AUTHORIZATION  SIGNATURE  AGREEMENT  AGREEMENT  DATETIME  VED BY  WED BY  W	SAMPLED B	Y: (please print) N	Michael Hetzler / Pace Ana	lytical - Red	<u> </u>	PLING/ANALYSIS COMMENTS Tal Coliform/F coli meth	sselan 88/09/38 pesu bo	though	1 00			-	-
Uthorize Pace® to perform the indicated tests. By signing I agree to the Pace® TERMS and CONDITIONS.  PER AUTHORIZATION SIGNATURE  AGREEMENT  VED BY  VED BY  VED BY  VED BY AGREEMENT  DATE/TIME  DATE/TIME  DATE/TIME  LOGGED BY LAB	RELINQUISH	IED DATE / TIME	121190		1.1/1				2010				
AGREENENT DATE/TIME RELINQUISHED BY  DATE/TIME RELINQUISHED BY  DATE/TIME DATE/TIME DATE/TIME  CITIZS I44 SWULMM  Custody (rev.1.1)	II I authon	ize Pace® to per PER AU	form the indicated tests. I	3y signing l	agree to the Pace® TERM SIGNATURE	S and CONDITIONS.	DATE				. 5	SAMPLE TYPE C IR = Non-Regulate	ODES
DATE/TIME RELINQUISHED BY  DATE/TIME LOGGED BY LAB  TOTAL MA  CLISTODY (rev 1.1)  DATE/TIME  LOGGED BY LAB  LOGGED BY LOGGED BY LAB  LOGGED BY LOGGED BY LAB  LOGGED BY LAB			REGUENT	,								- Routine	
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Custody (rev 1.1)	RECEIVED B	<u> </u>			ATE/TIME	RELINOUISHED BY			DATE/TIME		•	. Source Ground	water
mments Only Custody (rev 1.1)											<u> </u>	3 - Source Surface	Water
FRM-022.2 -Chain of Custody (rev 1.1)	RECEIVED B	KLAB  KLAB  Comments  Comm	Helit			14 4 SNUC /	2		DATE/TIME		6	- Other (Sent to Regulator)	
	FRM-002.2 - C	hain of Custody (n	ev 1.1)		7	-							

# Pace SAMPLE RECEIPT CHECKLIST WO NUMBER 15F0175

!			
Samples Received By: <u>KC</u>	Date: 6/11/25	Time: 1411	
Are samples for regulatory compliance?	Yes 🗖 No 🗆		

	Samples Received Via:		Marie.
Fed-Ex □ UPS □	Client Walk-In  Pace Field Service	Courier  Other	

Are samples for regulatory compliance? Yes No
THERMAL PRESERVATION
Were samples received in a cooler? Yes  No  If no, take temperature of representative sample container and record below.  If no, do they require thermal preservation? Yes  No  If no, why not? Nop-regulatory  Not Required by Method  Samples received on ice? Yes  No  Ice type? Wet  Ice Packs  Other  Samples received the same day collected? Yes  No
Therm. ID (Circle one): Therm-36(IR) Therm-59(IR) Therm-72(IR) Therm-73(IR) Therm-CO1(IR) Therm-CO1(IR) Other:
SAMPLE CONDITION AND PROCESSING
Do all sample IDs on labels match the COC? Yes No Custody seals present? Yes No No NA Samples in proper containers? Yes No Samples in proper containers? Yes No Sample containers damaged? Yes No Sufficient sample volume for indicated tests? Yes No Samples received with sufficient holding time? Yes No Are VOA vials free of headspace? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No No NA Samples received with sufficient holding time? Yes No NA Samples received with sufficient holding time?
CHEMICAL PRESERVATION  Were the sample containers received with labels that indicate that appropriate preservatives were present for the indicated tests? Yes  No N/A Were samples received properly dechlorinated? Yes No N/A For Dechlorination checks done by analysts, were dechlor, agent labels present? Yes No Are any of the pH verification checks or dechlorination checks being performed by a subcontract laboratory? Yes No N/A Were servation checked by Sample Receiving? Initials Date & Time Test Strip (ID
f preservative(s) were added by Sample Receiving, where they added at the same time as pH verification? Yes \Boxedon No \Boxedon N/A \Boxedon If no, Date & Time
Yes No NA  H2SO4 preserved samples confirmed to pH <2 (i.e., E350.1, SM5220, SM5310)?  HNO3 preserved samples confirmed to pH <2 (i.e., E200.7, E200.8, 6010)?  NaOH preserved samples confirmed to pH >10 (cyanide) or >9 (sulfide)?  NaOH preserved samples confirmed to pH >10 (cyanide) or >9 (sulfide)?
Vere any additional preservatives added after receipt because of a failed pH verification? Yes  No Initial pH: Final pH No Final pH No Servatives added on the date of sampling Yes No Servatives added on the date of sampling Yes No Servatives added on the date of sampling Yes No Servatives added at receipt:
ype: Volume Added: ID: Type: Volume Added: ID: ype: Volume Added: ID: Type: Volume Added: ID: OMMENTS, DISCREPANCEIS, ANOMALIES, NONCONFORMANCES