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: 25J0208

 Client PO#:
 Samples Received:
 10/08/2025 15:35 PM

 Estimated Completion:
 10/23/2025 23:00 PM

CC:

Client Specified QC Sample(s):

	Pace Analytical	BR-4-2	Date/Time	
Customer Sample ID	Lab ID	Matrix	Collected	Method
120 Gurnsey Drive	25J0208-01	Drinking Water	10/08/2025 08:09 AM	Fees Only
				Route Sampling Fee
				SM 9223 B Colilert-18
				Colilert-18 Total Coliform & E.coli
				P/A
Well 1	25J0208-02	Ground Water	10/08/2025 08:21 AM	SM 9223 B Colilert-18
				Total Coliform / E.coli. Quantitray
				- Colilert-18

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

PACE® - CHAIN OF CUSTODY (FC	(FOR DRINKING WATER - MICROBIOLOGY)	OLOGY)		LABORATORY	LABORATORY WORK ORDER#	
X 2218 Railroad Avenue, Redding, CA 96001 (530) 243-7234	243-7234 FAX (530) 243-7494			SN.	15 J 020 K	
3860 Morrow Lane, Suite F Chico, CA 95928 (530) 894-8966 FAX: (530) 894-5143	0) 894-8966 FAX: (530) 894-5143			PAGE 1	OF 1	<i>C</i>
CLIENT NAME	PROJECT NAME	PROJECT	PWS # (If Applicable)	Applicable)		Pare
BREESE II WATER SYSTEM	DRINKING WATER MONITORING	NITORING	- 57	5200008 TEHAMA	HAMA	2
MAILING ADDRESS	Contact for positive results:	REPORT TO X Email Mail Hardcopy		TURN AROUND TIME REQUESTED	REQUESTED	1
PO BOX 9062 BED RITIES CA 06080	Name: Autumn Walker		×	Standard Rush		
ייבר ברנון, כא שמנסט	Phone: 530-209-2748 Alt. contact for nocitive recults	Autumn Walker			ANALYSES REQUESTED	TED
INVOICE TO SAME	Name: Storm Craig	530-527-0170		7.6\	ay)	
SPECIAL INSTRUCTIONS / PO#	Phone: 530-736-5947 Weekend contact for positive results:	EMAIL breesewater@gmail.com		. coli		
CC REPORTS TO MIKE BUILER	Name: Mike Butler Phone: 530-680-7079	REGULATORY AGENCY Tehama Co Fnyrionmental Health	гоол Е	∃ \ emi		
1D #	SAMPLE LOCATION / IDENTIFICATION /	ATION / REGULATORY ID / SOURCE CODE	FIG CHIO	olilo Disto	olilo Colifo numerate	
10082 0807 AM PM	120 Gumsey D	(if Applicable)				
01 10 0825 0821 AM PM 5A	Well 1*	CA5200008_001_001	-	_		
W M MW	* Well House Door	Pound				
AM PM	ofen culture cu	mia)				
AM PM	whale	With Stark Chais				
Wd MA	Ci	- Cof 1550c.				
AM PM	100825744					
AM PM						
AM PM						
AM PW						
SAMPLED BY: (please print) Michael Hetzler / Pace Analytical - Redding		S COMMENTS				
RELINQUISHED DATE / TIME: (σ $O8$ \mathcal{U}^-		oka odnomije. od metiod used is sim 92236, uniess otherwise noted.	niess otnerwise	e noted.		
□ I authorize Pace® to perform the indicated tests. By signing I agree to the Pace® TERMS and CONDITIONS. NAME SIGNATURE	I agree to the Pace® TERMS and CONDITIONS SIGNATURE	S. DATE			\$*	*SAMPLE TYPE CODES (NR = Non-Regulated)
					-	Routine
RECEIVED BY:	DATE/TIME RELINOU	RELINQUISHED BY		DATE/TIME	2.	Repeat
ביים ביים ביים ביים ביים ביים ביים ביים					,	Replacement
Secretary By	DATE/TIME RELINGU	RELINQUISHED BY		DATE/TIME	5A	5A - Source Groundwater
RECEIVED BY LAB	DATE (TIME				85	5B - Source Surface Water
	XX 1535	MA FIN SINC		DATE/TIME	Ġ	6 · Other (Sent to Regulator)
of children and comments of the						

FRM-002.2 - Chain of Custody (rev 1.1)

SAMPLE RECEIPT CHECKLIST

Pace WO NUMBER 25 JO208

Samples Received By: NSA

Date: 10/8/25	Time:	535
Yes 🏿 No 🗌		

	Samples Received Via:	
Fed-Ex 🗌	Client Walk-In 🗌	Courier 🗆
UPS 🗆	Pace Field Service	Other 🗆

Are samples for regulatory compliance? Yes 🗵 No 🗆
THERMAL PRESERVATION
Were samples received in a cooler? Yes No
Therm. ID (Circle one): Therm-36(IR) Therm-59(IR) Therm-72(IR) Therm-73(IR) Therm-CO1(IR) Therm-CO2(IR) Other: Cooler #1 Init. Temp °C Correction °C Corrected Temp °C
SAMPLE CONDITION AND PROCESSING
Do all sample IDs on labels match the COC? Yes 💢 No 🗆
Custody seals present? Yes No No N/A
Samples in proper containers? Yes No 🗆
Sample containers damaged? Yes No 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 NA
CHEMICAL PRESERVATION
Were the sample containers received with labels that indicate that appropriate preservatives were present for the indicated tests? Yes No N/A
Preservation checked by Sample Receiving? Initials Date & Time Test Strip (ID)
If preservative(s) were added by Sample Receiving, where they added at the same time as pH verification? Yes 🔲 No 🔲 N/A 🔲 If no, Date & Time
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)?
Were any additional preservatives added after receipt because of a failed pH verification? Yes 🗌 No 🗌 Initial pH: Final pH
If yes, is addition of preservatives allowed by the method? Yes \Box \Box \Box \Box \Box \Box \Box \Box
List preservatives added at receipt:
Type: Volume Added: ID: Type: Volume Added: ID: ID:<
COMMENTS, DISCREPANCEIS, ANOMALIES, NONCONFORMANCES