

August 07, 2023

Kevin Roberts
Professional Service Industries, Inc.
11826 Borman Dr
Maryland Heights, MO 63146
TEL: (314) 432-8073
FAX: (314) 432-5119



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

RE: Harris Elementary/0029-5933-2

WorkOrder: 23071992

Dear Kevin Roberts:

TEKLAB, INC received 63 samples on 7/24/2023 12:48:00 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,



Aaron Renner
Project Manager
(630)324-6855
arenner@teklabinc.com



Report Contents

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

Client: Professional Service Industries, Inc.

Work Order: 23071992

Client Project: Harris Elementary/0029-5933-2

Report Date: 07-Aug-23

This reporting package includes the following:

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Definitions

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

Client: Professional Service Industries, Inc.

Work Order: 23071992

Client Project: Harris Elementary/0029-5933-2

Report Date: 07-Aug-23

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)



Definitions

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

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Work Order: 23071992

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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: Professional Service Industries, Inc.

Client Project: Harris Elementary/0029-5933-2

Work Order: 23071992

Report Date: 07-Aug-23

Cooler Receipt Temp: NA °C

Locations

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

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

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

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

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



Accreditations

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

Client: Professional Service Industries, Inc.

Client Project: Harris Elementary/0029-5933-2

Work Order: 23071992

Report Date: 07-Aug-23

State	Dept	Cert #	NELAP	Exp Date	Lab
Illinois	IEPA	100226	NELAP	1/31/2024	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	8/31/2023	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		1/31/2024	Collinsville
Missouri	MDNR	00930		5/31/2023	Collinsville
Missouri	MDNR	930		1/31/2025	Collinsville

Laboratory Results

<http://www.teklabinc.com/>
Client: Professional Service Industries, Inc.

Work Order: 23071992

Client Project: Harris Elementary/0029-5933-2

Report Date: 07-Aug-23

Matrix: DRINKING WATER

Sample ID	Client Sample ID	Certification	Qual	RL	Result	Units	DF	Date Analyzed	Date Collected
EPA 600 4.1.4, 200.8 R5.4, METALS BY ICPMS (TOTAL)									
Lead									
23071992-049A	HES-F-301-1-50	NELAP		1.0	1.0	µg/L	1	08/01/2023 09:12	07/21/2023 11:19
23071992-050A	HES-DF-302-1-51	NELAP		1.0	1.1	µg/L	1	08/02/2023 12:09	07/21/2023 11:20
23071992-051A	HES-F-303-1-52	NELAP		1.0	2.8	µg/L	1	08/02/2023 12:14	07/21/2023 11:21
23071992-052A	HES-WC-C4-1-53	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 12:18	07/21/2023 11:22
23071992-053A	HES-WC-C4-1-54	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 12:49	07/21/2023 11:23
23071992-054A	HES-DF-305-1-55	NELAP		1.0	25.7	µg/L	1	08/02/2023 12:54	07/21/2023 11:25
23071992-055A	HES-F-306-1-56	NELAP		1.0	5.0	µg/L	1	08/02/2023 12:58	07/21/2023 11:26
23071992-056A	HES-DF-307-1-57	NELAP		1.0	13.9	µg/L	1	08/02/2023 13:03	07/21/2023 11:27
23071992-057A	HES-DF-308-1-58	NELAP		1.0	2.4	µg/L	1	08/02/2023 13:07	07/21/2023 11:28
23071992-058A	HES-DF-CAFÉ-1-59	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 13:12	07/21/2023 10:36
23071992-059A	HES-IM-CAFÉ-1-60	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 14:19	07/21/2023 10:37
23071992-060A	HES-BF-C1-1-61	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 13:16	07/21/2023 10:40
23071992-061A	HES-BF-C2-1-62	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 13:48	07/21/2023 10:51
23071992-062A	HES-BF-C3-1-63	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 13:52	07/21/2023 11:06
23071992-063A	HES-BF-C4-1-64	NELAP		1.0	< 1.0	µg/L	1	08/02/2023 13:57	07/21/2023 11:24



Receiving Check List

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

Client: Professional Service Industries, Inc.

Work Order: 23071992

Client Project: Harris Elementary/0029-5933-2

Report Date: 07-Aug-23

Carrier: Employee

Received By: MBP

Completed by:

On:

27-Jul-23

Lindsey Maddox

Reviewed by:

On:

27-Jul-23

Ellie Hopkins

Pages to follow: Chain of custody

Extra pages included

Not Present Temp °C NA
Ice Blue Ice Dry Ice

Shipping container/coolier in good condition?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not Present <input type="checkbox"/>	Temp °C NA
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. - lmaddox - 7/27/2023 4:48:54 PM

CHAIN OF CUSTODY

pg. 1 of 7 Work order # 23071092

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

Client:	Professional Service Industries, Inc.																																																																										
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City / State / Zip	Maryland Heights, MO 63146																																																																										
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E-Mail:	kevin.roberts@intertek.com																																																																										
Lab Notes																																																																											
Preserved in:	<input checked="" type="checkbox"/> LAB	<input checked="" type="checkbox"/> FIELD	<input type="checkbox"/> NO ICE																																																																								
Samples on:	<input checked="" type="checkbox"/> ICE	<input checked="" type="checkbox"/> BLUE ICE	<input type="checkbox"/> LTG# <u>N/A</u> °C																																																																								
FOR LAB USE ONLY																																																																											
Comments:																																																																											
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																																																																										
<u>KCR / AHI</u>																																																																											
Results Requested	Billing Instructions	# and Type of Containers	MATRIX																																																																								
<input checked="" type="checkbox"/> Standard	<input type="checkbox"/> 1-2 Day (100% Surcharge)		Lead																																																																								
<input type="checkbox"/> Other	<input type="checkbox"/> 3 Day (50% Surcharge)		Groundwater																																																																								
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Drinking Water																																																																											
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<table border="1"> <thead> <tr> <th>OTHER</th> <th>NaHSO4</th> <th>MeOH</th> <th>HCl</th> <th>H2SO4</th> <th>NaOH</th> <th>HNO3</th> <th>UNPRES</th> </tr> </thead> <tbody> <tr> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td></td> </tr> <tr> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> <td>X</td> </tr> </tbody> </table>				OTHER	NaHSO4	MeOH	HCl	H2SO4	NaOH	HNO3	UNPRES	X								X	X							X	X	X						X	X	X	X					X	X	X	X	X				X	X	X	X	X	X			X	X	X	X	X	X	X		X	X	X	X	X	X	X	X
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13071092-02	HES-SN-KIT-I-2	/1026	-1																																																																								
13071092-03	HES-F-KIT-I-3	/1027	-1																																																																								
13071092-04	HES-F-KIT-I-4	/1028	-1																																																																								
13071092-05	HES-PF-KIT-I-5	/1029	-1																																																																								
13071092-06	HES-F-KIT-I-6	/1030	-1																																																																								
13071092-07	HES-F-KIT-I-7	/1031	-1																																																																								
13071092-08	HES-F-KIT-I-8	/1032	-1																																																																								
13071092-09	HES-F-KIT-I-9	/1033	-1																																																																								
13071092-10	HES-SN-KIT-I-10	/1034	-1																																																																								
Relinquished By		Date/Time	Received By																																																																								
<u>Chris Young</u>		7/21/23 1:400	<u>Chris Young</u>																																																																								
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Date/Time																																																																											
7/24/23 1:400																																																																											

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.

BottleOrder: 81924



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

CHAIN OF CUSTODY

pg. 2 of 7 Work order # _____

Client: Professional Service Industries, Inc.	Samples on: <input checked="" type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input type="checkbox"/> NO ICE <input type="checkbox"/> 0°C <input type="checkbox"/> LTG#						
Address: 11826 Bowman Dr	Preserved in: <input checked="" type="checkbox"/> LAB <input type="checkbox"/> FIELD						
City / State / Zip Maryland Heights, MO 63146	FOR LAB USE ONLY						
Contact: Kevin Roberts	Phone: (314) 452-3673						
E-Mail: kevin.roberts@intertek.com	Fax:						
Lab Notes							
Client Comments: No sample 15 since source did not work.							
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 Harris Elementary / 0029-5933-2		Sample Collector's Name KCR/AHM		MATRIX		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		# and Type of Containers			
Lab Use Only	Sample Identification	Date/Time Sampled					
201192-01	HES-WC-CAFE-1-1	7/21/23 / 1035	/	X	X	X	X
-02	HES-WC-C-1-12	1038	/	X	X	X	X
-03	HES-WC-C-1-13	1039	/	X	X	X	X
-04	HES-F-TL-1-14	1041	/	X	X	X	X
-05	HES-F-101-1-16	1043	/	X	X	X	X
-06	HES-F-100-1-17	1044	/	X	X	X	X
-07	HES-F-103-1-18	1045	/	X	X	X	X
-08	HES-DF-102-1-19	1046	/	X	X	X	X
-09	HES-DF-104-1-20	1047	/	X	X	X	X
-10	HES-F-105-1-21	1048	/	X	X	X	X
Relinquished By Alena Maffen		Date/Time 7/21/23 / 1400	Received By SARAH 7/24/23 / 1400	Date/Time 7/24/23 / 1400			

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.

BottleOrder: 81924.



CHAIN OF CUSTODY

pg. 3 of 7 Work order #

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

Client: Professional Service Industries, Inc.	Samples on: <input checked="" type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input type="checkbox"/> NO ICE <input type="checkbox"/> °C <input type="checkbox"/> °F <input type="checkbox"/> LTG#		
Address: 11826 Bowman Dr	Preserved in: <input checked="" type="checkbox"/> LAB <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> FOR LAB USE ONLY		
City / State / Zip: Maryland Heights, MO 63146	Lab Notes		
Contact: Kevin Roberts	Phone: (314) 432-8073		
E-Mail: kevin.roberts@intertek.com	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			
		INDICATE ANALYSIS REQUESTED	
		MATRIX	
		Lead	
		Groundwater	
		Special Waste	
		Sludge	
		Soil	
		Drinking Water	
		Aqueous	
Project Name/Number	Sample Collector's Name		
Results Requested		Billing Instructions	# and Type of Containers
<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 Identification	Date/Time Sampled	
12011912-01	HES-WC-C2-1-22	7/21/23 / 1049	X
002	HES-WC-C2-1-23	7/21/23 / 1050	X
003	HES-DF-108-1-24	7/21/23 / 1052	X
004	HES-F-107-1-25	7/21/23 / 1053	X
005	HES-DF-109-1-26	7/21/23 / 1054	X
006	HES-DF-110-1-27	7/21/23 / 1055	X
007	HES-F-425-1-28	7/21/23 / 1056	X
008	HES-F-405-1-29	7/21/23 / 1057	X
009	HES-F-407-1-30	7/21/23 / 1058	X
010	HES-F-407-1-31	7/21/23 / 1059	X
Relinquished By		Date/Time	Received By
Alysa Morgan		7/21/23 / 1430	Tracy
		7/24/23 / 1430	Tracy
		7/24/23 / 1248	

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.

BottleOrder: 81924



CHAIN OF CUSTODY

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

pg. 4 of 7 Work order # _____

Client: Professional Service Industries, Inc.	Address: 11826 Bowman Dr Maryland Heights, MO 63146	City / State / Zip: Kevin Roberts kevin.roberts@intertek.com	Phone: (314) 432-8073	Fax:
Samples on: <input checked="" type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input type="checkbox"/> NO ICE Preserved in: <input checked="" type="checkbox"/> LAB <input type="checkbox"/> FIELD FOR LAB USE ONLY				
Lab Notes Client Comments:				
<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</p> <p>Are these samples known to be hazardous? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>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</p>				
Project Name/Number		Sample Collector's Name KCR/AHM		
Results Requested	Billing Instructions	# and Type of Containers		
<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 Identification	Date/Time Sampled		
180710218	HES-F-409C-1-32	7/21/23/1100	-	-
180710219	HES-F-201-1-33	/ 1101	-	-
180710220	HES-F-202-1-34	/ 1102	-	-
180710221	HES-DF-203-1-35	/ 1103	-	-
180710222	HES-WL-C3-1-36	/ 1104	-	-
180710223	HES-WL-C3-1-37	/ 1105	-	-
180710224	HES-DF-205-1-38	/ 1107	-	-
180710225	HES-F-206-1-39	/ 1108	-	-
180710226	HES-DF-207-1-40	/ 1109	-	-
180710227	HES-DF-208-1-41	/ 1110	-	-
Relinquished By Albert Morgan		Date/Time 7/21/23 1400	Received By Cory	
		Date/Time 7-24-23		
		Date/Time 7/24/23	1248	

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.

BottleOrder: 81924



CHAIN OF CUSTODY

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

pg. 5 of 7 Work order #

Client: Address: City / State / Zip Contact: E-Mail:	Professional Service Industries, Inc. 11826 Barman Dr Maryland Heights, MO 63146 Kevin Roberts kevin.roberts@intertek.com	Samples on: <input checked="" type="checkbox"/> ICE <input type="checkbox"/> SHOE ICE <input type="checkbox"/> NOICE <input type="checkbox"/> LTG <input type="checkbox"/> GC Preserved in: <input checked="" type="checkbox"/> LAB <input type="checkbox"/> FIELD <input type="checkbox"/> FOR LAB USE ONLY Lab Notes Client Comments:	
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	MATRIX	INDICATE ANALYSIS REQUESTED
Results Requested	Billing Instructions	# and Type of Containers	
<input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other <input type="checkbox"/> 3 Day (50% Surcharge)		OTHER NaHSO4 MeOH HCL H2SO4 NaOH HNO3 UNPRES	
Lab Use Only	Sample Identification	Date/Time Sampled	
103172-04	HES-F-OF-C-1-42	7/21/23 / 1111	X
103172-05	HES-F-NVK-1-43	/ 1112	X
103172-06	HES-DF-501-1-44	/ 1113	X
103172-07	HES-DF-503-1-45	/ 1114	X
103172-08	HES-DF-502-1-46	/ 1115	X
103172-09	HES-F-416A-1-47	/ 1116	X
103172-10	HES-F-416A-1-48	/ 1117	X
103172-11	HES-DF-301-1-49	/ 1118	X
103172-12	HES-F-301-1-50	/ 1119	X
103172-13	HES-DF-302-1-51	/ 1120	X
Relinquished By	Date/Time	Received By	
Alfred Wagner	7/21/23 / 11400	Date/Time	
Alfred Wagner	7-24-23	Date/Time	
		7-24-23	
		7/24/23 1248	

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BottleOrder: 81924



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

CHAIN OF CUSTODY

pg. 6 of 7 Work order # _____

Client:	Professional Service Industries, Inc.		
Address:	11825 Bowman Dr		
City / State / Zip:	Maryland Heights, MO 63146		
Contact:	Kevin Roberts	Phone:	(314) 432-8073
E-Mail:	kevin.roberts@intertek.com		
Fax:			

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

Samples On:		<input checked="" type="checkbox"/> ICE	<input type="checkbox"/> BLUE ICE	<input type="checkbox"/> NO ICE	°C	LTS#
Preserved In:		<input type="checkbox"/> LAB	<input checked="" type="checkbox"/> FIELD	FOR LAB USE ONLY		
Lab Notes						
Client Comments:						
INDICATE ANALYSIS REQUESTED						
Project Name/Number		Sample Collector's Name			MATRIX	
Harms Elementary / 0029-5933-2		KCR / AHM				
<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		
Lab Use Only		Sample Identification	Date/Time Sampled			
0301190705	HES-F-303-1-52	7/21/23/ 11 21	-			X
051	HES-WC-U-4-1-S3	/ 1122	-			X
053	HES-WC-U-4-1-54	/ 1123	-			X
054	HES-DF-305-1-55	/ 1125	-			X
055	HES-F-306-1-56	/ 1126	-			X
056	HES-DF-307-1-57	/ 1127	-			X
057	HES-DF-308-1-58	/ 1128	-			X
058	HES-BF-CAFE-1-59	/ 1036	-			X
059	HES-IM-CAFE-1-60	/ 1037	-			X
060	HES-BF-CA-1-61	→ / 1040	-			X
Relinquished By		Date/Time	Received By		Date/Time	
Mark Morgan		7/21/23 1440	Mark		7-24-23	
Mark		7-24-23	Dawn		7/24/23 1248	

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BottleOrder: 81924



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

CHAIN OF CUSTODY

pg. 7 of 7 Work order # _____

Client: Address: City / State / Zip Contact: E-Mail:	Samples on: <input checked="" type="checkbox"/> ICE <input type="checkbox"/> BLUE ICE <input type="checkbox"/> NOICE		C <input type="checkbox"/> LTC#	
	FOR LAB USE ONLY			
Preserved in: <input checked="" type="checkbox"/> LAB <input type="checkbox"/> FIELD		Lab Notes		
Phone: (314) 432-8073				
kevin.roberts@intertek.com		Fax: _____		
Client Comments:				
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 Harris Elementary / 0023-5933-2	Sample Collector's Name KL2 / AHM	INDICATE ANALYSIS REQUESTED		
		MATRIX	INDICATE ANALYSIS REQUESTED	
Results Requested <input checked="" type="checkbox"/> Standard <input type="checkbox"/> 1-2 Day (100% Surcharge) <input type="checkbox"/> Other _____	Billing Instructions <input type="checkbox"/> 3 Day (50% Surcharge)	Lead		
		Groundwater		
Special Waste				
Sludge				
Soil				
Drinking Water				
Aqueous				
Lab Use Only	Sample Identification HES-BF-C1-1-62 HES-BF-C3-1-63 HES-BF-C4-1-64	Date/Time Sampled 7/21/23 / 1051 7/21/23 / 1136 7/21/23 / 1124	OTHER	
			# and Type of Containers	NaHSO4 MeOH HCl H2SO4 NaOH HNO3 UNPRES
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				
Retraining Bella Meyer Rick	Date/Time 7/21/23 / 1400 7-24-23	Received By Bella Rick	Date/Time 7-24-23 7/24/23 1248	
Bottle Order: 81924 Photo Print				

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