

3821 Buck Drive
 Cortland NY 13045
 Phone: (607)753-3403 Fax: (607)753-3415
 NY #10795, EPA #NY00935

Microbac Laboratories, Inc. CHAIN OF CUSTODY

MNY Workorder #

Client Information		Billing/Invoice:		Analysis Requested		Receiving Info (Lab Use Only)	
Name: Otsego Northern Catskills BOCES Address: 31 Center Street Oneonta, NY 13820 Contact: Joshua Reiss Phone: 607-441-5342 Project: Roxbury Quote ID: Lead Testing PO#: 16-02497 Rush TAT Bus. Days: <2 2-5 5-7 7-10 Carbon Copy: Yes Email Results: Yes Fax Results: Yes		Accounts Payable Date Req.:		Total Lead (DW) (EPA 200.8) Plastic 250 ml HNO3		Ice: YES NO Cooler: YES NO Sample Temp: Cooler Seal: YES NO Pickup: YES NO Dropoff: C W Accepted? YES NO	
Sample Information				Comments/Field Data			
Description/Location	Date	Time	Matrix	Type	Number of Containers for Analysis Requested	Comments/Field Data	
F1 Lower Level Hall fountain	6/24/16	9:23A		Gr/DW	1	001152	
F2 Kitchen Hall fountain	6/24/16	9:47				001229	
F3 1.R. Restrom. fountain	6/24/16	9:40				001164	
F4 1st fl. New end hall fountain	6/24/16	10:16				001083	
F5 1st fl. old end hall fountain	6/24/16	10:03				001122	
F6 2.R. Restrom. fountain	6/24/16	10:24				001213	
F7 2nd fl. New end hall fountain	6/24/16	10:28				001235	
F8 2nd fl. Old end hall fountain	6/24/16					001265	
F9 Neumann Center fountain	6/24/16	9:30A				001224	
F10 Boys Locker fountain	6/24/16	9:43				001205	
F11 Girls Locker fountain	6/24/16	9:46A				001104	
S1 faculty rm sink	6/24/16	9:27				001168	
S2 Classroom 125	6/24/16	9:35				001271	
S3 Classroom 123	6/24/16	9:38				001060	
S4 Classroom 105	6/24/16	10:11				001259	
Print Name and Company				Date/Time			
Sampled: JOSH REISS ONC BOCES				6/24/16 10:48			
Received:				Comments			
Received:				• All are first draw samples			

Microbac Laboratories (MNY) may be unable to perform a portion of the requested testing in which case we will subcontract the analysis to another accredited laboratory. By signing this document you are attesting that you have been informed by MNY of the intent to subcontract and are in agreement with this action.

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MNY Workorder #

Client Information		Billing/Invoice:	
Name:	Otsego Northern Catskills BOCES	Accounts Payable	
Address:	31 Center Street Oneonta, NY 13820		
Contact:	Joshua Reiss		
Phone:	607-441-5342		
Project:	Roxbury		
Quote ID:	Lead Testing	PO#:	16-02497
Rush TAT Bus. Days:	<2 2-5 5-7 7-10	Date Req.:	
Carbon Copy:	Yes		
Email Results:	Yes		
Fax Results:	Yes		

Sample Information			
Description/Location	Date	Time	Matrix Type
1 S5 Classroom 113	6/24/16	10:14	Gr/DW
2 S6 Supt office sink	6/24/16	10:01	
3 S7 Nurses sink	6/24/16	10:05	
4 S8 Kitchen sink	6/24/16	9:49	
5 S9 Dishroom sink (faucet w/sprayer)	6/24/16	9:54	
6 S10 Vocal rm 185	6/24/16	10:08	
7 S11 Main Office sink	6/24/16	9:58	
8 S12 Classroom 220	6/24/16	10:19	
9 S13 Classroom 219	6/24/16	10:23	
10 S14 Library office sink	6/24/16	10:36	
11 S15 C.R. 240	6/24/16	10:34	
12 S16 Home Ec. rm sink	6/24/16	10:31	
13 S17 Home Ec. rm sink	6/24/16	10:31	
14 S18 2nd fl ART	6/24/16	10:44	
15			

Analysis Requested	Number of Containers for Analysis Requested	Comments/Field Data
Total Lead (DW) (EPA 200.8)	1	001194
Plastic		001193
250 ml		001097
HNO3		001097 001227
		001043
		001285
		001098
		001222
		001272
		001079
		001136
		001056
		001082
		001265

Receiving Info (Lab Use Only)
Ice: YES NO
Cooler: YES NO
Sample Temp:
Cooler Seal: YES NO
Pickup: YES NO
Dropoff: C W
Accepted? YES NO
Container Material
Container Size(in MI)
Preservative

Print Name and Company	Date/Time	Comments
Sampled: JOSH REISS ONC BOCES	6/24/16 10:48	All are first draw samples
Received:		
Received:		

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