



Aqua Pro-Tech, a Pace® Analytical Laboratory
 1275 Bloomfield Avenue, Fairfield, NJ 07004 (973) 227-0422

Date:	11/14/2023
Invoice #:	237116083
PO Number:	N/A
Terms:	Net 30 days
Due Date:	12/14/2023

INVOICE: 237116083

Project: School / Suzanne Powell

Include with Payment: Invoice: 237116083 AR Code: 71-999998
 363 Broadway

Bill To:
 Suzanne Powell
 363 Broadway
 Paterson, NJ 07501

Remit To:
 Pace Analytical Services, LLC
 P.O. Box 684056
 Chicago, IL 60695-4056

Received: 11/07/2023
 Work Order: 23K0341
 APL ID: 2316083

Invoice Total: \$750.00

Laboratory ID	Sample Description	Matrix	Analysis	Credit(s)	TAT	Price
23K0341-01	Kitchen	Drinking Water	Lead and Copper		10 day	\$150.00
Sample Total:						\$150.00
23K0341-02	Boys Bldg1 1st fl.	Drinking Water	Lead and Copper		10 day	\$150.00
Sample Total:						\$150.00
23K0341-03	Girls Bldg1 2nd fl.	Drinking Water	Lead and Copper		10 day	\$150.00
Sample Total:						\$150.00
23K0341-04	Boys Bldg2 1st fl.	Drinking Water	Lead and Copper		10 day	\$150.00
Sample Total:						\$150.00
23K0341-05	Girls Bldg2 2nd fl.	Drinking Water	Lead and Copper		10 day	\$150.00
Sample Total:						\$150.00

Invoice Total: \$750.00

PAID CK # 4951

TT

Include with Payment: Invoice: 237116083 AR Code: 71-999998

FAIR.AR@pacelabs.com

Terms: Net 30 days

Page 1 of 1

11/14/2023



Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Avenue, Fairfield, NJ 07004 (973) 227-0422



Client: Suzanne Powell
363 Broadway
Paterson, NJ 07501

Order ID Number: 23K0341
Collected : 11/07/2023 7:43
Received: 11/07/2023

Contact:
Client Project: Suzanne Powell

Report Date: 11/14/2023 10:32
Customer Service Rep: Tony Tudda

Analytical Results Summary

Sample Number Analyte	Method	Prepared	Analyzed	Result	Qual	MDL	RL	Units
23K0341-01	Drinking Water	Kitchen						
Total Metals								
Copper	EPA 200.8	11/13/23 15:23	11/13/23 15:23	0.0536			0.00200	mg/L
Lead	EPA 200.8	11/13/23 15:23	11/13/23 15:23	< 0.00200	U		0.00200	mg/L
23K0341-02	Drinking Water	Boys Bldg1 1st fl.						
Total Metals								
Copper	EPA 200.8	11/13/23 15:25	11/13/23 15:25	0.0434			0.00200	mg/L
Lead	EPA 200.8	11/13/23 15:25	11/13/23 15:25	< 0.00200	U		0.00200	mg/L
23K0341-03	Drinking Water	Girls Bldg1 2nd fl.						
Total Metals								
Copper	EPA 200.8	11/13/23 15:28	11/13/23 15:28	0.0397			0.00200	mg/L
Lead	EPA 200.8	11/13/23 15:28	11/13/23 15:28	0.00327			0.00200	mg/L
23K0341-04	Drinking Water	Boys Bldg2 1st fl.						
Total Metals								
Copper	EPA 200.8	11/13/23 15:30	11/13/23 15:30	0.0410			0.00200	mg/L
Lead	EPA 200.8	11/13/23 15:30	11/13/23 15:30	< 0.00200	U		0.00200	mg/L
23K0341-05	Drinking Water	Girls Bldg2 2nd fl.						
Total Metals								
Copper	EPA 200.8	11/13/23 15:33	11/13/23 15:33	0.0547			0.00200	mg/L
Lead	EPA 200.8	11/13/23 15:33	11/13/23 15:33	0.00257			0.00200	mg/L

Sudip Pradhan
Laboratory Director



b
Fairfield, NJ 07004
TEL: 973-227-0422
FAX: 973-227-2813

Contamination Level

Low
 Medium
 High

CHAIN OF CUSTODY

Send Report To: Sozanne Powell

Address: 363 Broadway

Phone: 973-955-5930

Send Invoice To: Paterson NJ 07501

Address: Pac@Pac100.org

Sampling Location: water test

Sampled By: Zig McCoy

Date and Time Required: _____
**May Need Lab Approval

Report/ Electronic Format

Results Only / NY ASP-A
 Reduced: NJ DEP
 Full: NJ DEP / NY ASP-B
 State Forms/EZ Reporting

Excel Summary
EqUIS
EnviroData
Hazsite EDD

Turn-Around Time

APL Standard 2 Weeks
Rush (Choose One Below)

1 Day
 2 Days
 3 Days
Other (Specify Below)

PWSID # _____ SRP# _____

Comments/Special Instructions:

Cooler Temp: 3.5

ANALYSIS REQUESTED

Lead & Copper

Preservative

No. of Bottles

Sample Type

Matrix Abbreviations:

W - Wipes
O - Oil
PC - Paint
Chips

Sample Source: Field ID

Collect Date

Collect Time

Matrix

Sample #	Field ID	Collect Date	Collect Time	Matrix	Grab	Comp	No. of Bottles
-01	Kitchen	11/7/23	7:43AM	G			1
-02	Boys Bldg 1 1st fl.	11/7/23	7:38AM	G			1
-03	Girls Bldg 1 2nd fl.	11/7/23	7:41AM	G			1
-04	Boys Bldg 2 1st fl.	11/7/23	7:49AM	G			1
-05	Girls Bldg 2 2nd fl.	11/7/23	7:47AM	G			1

RELINQUISHED BY: _____
Print: Zig McCoy
Sign: [Signature]

RECEIVED BY: _____
Print: Angel Rosas
Sign: [Signature]

Date: 11/7/23
Time: 0920

23K0341

Sample Condition Upon Receipt Form (SCUR)



Affix Sample Label Here

Date and Initials of person:
 Examining contents: 11/7 AR
 Label: 11/7 AR
 Deliver to location: _____
 pH: 11/7 AR

Thermometer Used: TRO3 Date: 11/7/23 Time: 0920 Initials: AR

State of Origin: NJ

Cooler #1 Temp: °C 4.1 (Visual) -0.6 (Correction Factor) 3.5 (Actual) Samples on ice, cooling process has begun

Courier: Fed Ex UPS USPS Client Commercial Pace Other _____

Shipping Method: First Overnight Priority Overnight Standard Overnight Ground Other _____

Tracking # _____

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No Ice: Wet Blue Melted None

Packing Material: Bubble Wrap Bubble Bags None Other _____

Samples were collected by Pace employee Yes No N/A

Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature on COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sampler Name and Signature on COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Preservation Information: Preservative: _____ Lot #/Trace #: _____ Date: _____ Time: _____ Initials: _____
All Containers needing preservation are found to be in compliance with EPA recommendation: Exceptions: Vials, Microbiology, O&G, Metals	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Additional Login Comments: _____

Client notification/ Resolution

Person Contacted: _____ Date/Time: _____
 Comments/Resolution: _____