ALS Environmental-Kelso

1317 South 13th, Kelso, WA 98626 (360) 577-7222 FAX (360) 636-1068

SR# K180643 1

PAGE _____ OF _____

Project Name: LDW ENR/AC Pilot Study **Project Number:** LY15160310

Project Manager: Cliff Whitmus - see below for POC **Company:** Wood.

Company/Address: 3500 188th St. SW, Suite 601 **Phone:** 425-921-4023

City, State, Zip: Lynnwood, WA 98037 **E-mail:** cliff.whitmus@woodplc.com

Sampler's Signature: _____

Sample I.D.	Date	Time	LAB ID	Matrix	Number of Containers	TOC - EPA 9060 (duplicate analysis)	MS/Dup				REMARKS
LDW-Y1-SC-ENR-CA-CORE	7/6/18	1045	1	sediment	1	X					
LDW-Y1-SC-ENR-CB-CORE		1100	2	sediment	1	X					
LDW-Y1-SC-ENR-CC-CORE		1120	3	sediment	1	X					
LDW-Y1-SC-ENR+AC-CA-CORE		1205	4	sediment	1	X					
LDW-Y1-SC-ENR+AC-CB-CORE		1245	5	sediment	1	X					
LDW-Y1-SC-ENR+AC-CC-CORE		1300	6	sediment	1	X					

Analysis Requested

TURNAROUND REQUIREMENTS

____ 24 hr ____ 48 hr ____ 5 day

_X_ Standard (21 days)

____ Provide FAX Preliminary Results

Requested Report Date:_____

Invoice Information

P.O. # _____

Bill to: Diane Shannon and Crystal Thimsen at Wood

REPORT REQUIREMENTS

_____ I. Routine Report: Results, Method Blank, Surrogate, as required

_x_ II. Report Dup., MS, MSD as required

_____ III. Data Validation Report (includes raw data)

_____ IV. CLP Deliverable Report

_____ V. EDD

Comments/Special Instructions:

ALS Quote # 42097

POC: Gretchen Heavner - gretchen.heavner@floydsnider.com #206-292-2078

Invoices: email to diane.shannon@woodplc.com and crystal.thimsen@woodplc.com

Prior to taking a sample aliquot, please mix the sample thoroughly. Then take as large an aliquot as possible (preferrably ~20g) to air dry and grind.

RELINQUISHED BY:	RECEIVED BY:	RELINQUISHED BY:	RECEIVED BY:
Signature: Rob Galmour	Signature: [illegible]	Signature:	Signature:
Printed Name: Rob Galmour	Printed Name: K Morrow	Printed Name:	Printed Name:
Firm: Wood	Firm: ALS	Firm:	Firm:
Date/Time: 7/9/18 1245	Date/Time: 7/10/18 0950	Date/Time:	Date/Time: