



June 23, 2020

Heather Malone
Lake St. Louis Community Association
100 COGNAC COURT
LAKE ST LOUIS, MO 63367

RE: Lake St Louis fecal

Dear Heather Malone:

Please find enclosed the analytical results for the **8** sample(s) the laboratory received on **6/22/20 11:14 am** and logged in under work order **0064456**. All testing is performed according to our current TNI accreditations unless otherwise noted. This report cannot be reproduced, except in full, without the written permission of PDC Laboratories, Inc.

If you have any questions regarding your report, please contact your project manager. Quality and timely data is of the utmost importance to us.

PDC Laboratories, Inc. appreciates the opportunity to provide you with analytical expertise. We are always trying to improve our customer service and we welcome you to contact the Director of Client Services, Lisa Grant, with any feedback you have about your experience with our laboratory at 309-683-1764 or lgrant@pdclab.com.

Sincerely,

Amy Holmes
Project Manager
(314) 595-7336
aholmes@pdclab.com





ANALYTICAL RESULTS

Sample: 0064456-01
Name: Paris Ct
Matrix: Water - Grab

Sampled: 06/22/20 08:28
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, 160 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*

Sample: 0064456-02
Name: Isle-De-Fleur
Matrix: Water - Grab

Sampled: 06/22/20 09:31
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, 81 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*

Sample: 0064456-03
Name: Main Marina
Matrix: Water - Grab

Sampled: 06/22/20 08:16
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, 36 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*

Sample: 0064456-04
Name: Club
Matrix: Water - Grab

Sampled: 06/22/20 09:38
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, 27 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*

Sample: 0064456-05
Name: Villa's
Matrix: Water - Grab

Sampled: 06/22/20 09:18
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, 90 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*



ANALYTICAL RESULTS

Sample: 0064456-06
Name: Lakewood
Matrix: Water - Grab

Sampled: 06/22/20 09:07
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, 27 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*

Sample: 0064456-07
Name: Timberline
Matrix: Water - Grab

Sampled: 06/22/20 08:58
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, 36 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*

Sample: 0064456-08
Name: Jefferson Point
Matrix: Water - Grab

Sampled: 06/22/20 10:02
Received: 06/22/20 11:14

Table with 10 columns: Parameter, Result, Unit, Qualifier, Prepared, Dilution, MRL, Analyzed, Analyst, Method. Row 1: Fecal coliform bacteria, < 10 CFU/100 ml, 06/22/20 15:24, 1, 10, 06/22/20 15:24, KAM, SM 9222D*



NOTES

Specifications regarding method revisions and method modifications used for analysis are available upon request. Please contact your project manager.

* Not a TNI accredited analyte

Certifications

CHI - McHenry, IL - 4314-A W. Crystal Lake Road, McHenry, IL 60050

TNI Accreditation for Drinking Water and Wastewater Fields of Testing through IL EPA Accreditation No. 100279
Illinois Department of Public Health Bacterial Analysis in Drinking Water Approved Laboratory Registry No. 17556

PIA - Peoria, IL - 2231 W. Altorfer Drive, Peoria, IL 61615

TNI Accreditation for Drinking Water, Wastewater, Solid and Hazardous Material Fields of Testing through IL EPA Accreditation No. 100230

Illinois Department of Public Health Bacterial Analysis in Drinking Water Approved Laboratory Registry No. 17553

Drinking Water Certifications/Accreditations: Iowa (240); Kansas (E-10338); Missouri (870)

Wastewater Certifications/Accreditations: Arkansas (88-0677); Iowa (240); Kansas (E-10338)

Solid and Hazardous Material Certifications/Accreditations: Arkansas (88-0677); Iowa (240); Kansas (E-10338)

SPMO - Springfield, MO - 1805 W Sunset Street, Springfield, MO 65807

USEPA DMR-QA Program

STL - Hazelwood, MO - 944 Anglum Rd, Hazelwood, MO 63042

TNI Accreditation for Wastewater, Solid and Hazardous Material Fields of Testing through KS KDHE Certification No. E-10389

TNI Accreditation for Wastewater, Solid and Hazardous Material Fields of Testing through IL EPA Accreditation No. - 200080

Illinois Department of Public Health Bacterial Analysis in Drinking Water Approved Laboratory, Registry No. 171050

Missouri Department of Natural Resources - Certificate of Approval for Microbiological Laboratory Service - No. 1050



Certified by: Amy Holmes, Project Manager



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 Florissant, MO 63033
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CHAIN OF CUSTODY RECORD
 Phone (314) 432-0550 or (314) 921-4488
 Fax (314) 432-4977

State where samples collected _____
 (Instructions/Sample Acceptance Policy on Reverse)

ALL SHADED AREAS MUST BE COMPLETED BY CLIENT (PLEASE PRINT)

1 CLIENT Lake St. Louis Community Ass.		PROJECT NUMBER	P. O. NUMBER	MEANS SHIPPED	3 ANALYSIS REQUESTED	4 (FOR LAB USE ONLY) LOGIN # <u>B064452</u> LOGGED BY: _____ LAB PROJ # _____ TEMPLATE: _____ PROJ. MGR.: _____
ADDRESS 100 Cognac Ct.		PHONE NUMBER 636-625-8276	FAX NUMBER	EMAIL ADDRESS hmalone@slca.com	MATRIX TYPES: WW-WASTEWATER DW-DRINKING WATER GW-GROUND WATER WWSL-SLUDGE MMS-SOLID LW-LEACHATE LA-LEACHATE AD-ADREOUS SS-SOILS	
CITY STATE ZIP Lake St. Louis Mo 63367		SAMPLERS SIGNATURE 	CONTACT PERSON Heather Malone			
2 SAMPLE DESCRIPTION AS YOU WANT ON REPORT		DATE COLLECTED	TIME COLLECTED	SAMPLE TYPE GRAB	MATRIX TYPE	Bottle Count Fecal
Paris Ct		6-22-20	8:28			
Isle - De - Fleur		6-22-20	9:31			
Main Marina		6-22-20	8:16			
Club		6-22-20	9:38			
Villa's		6-22-20	9:18			
Lakewood		6-22-20	9:07			
Timberline		6-22-20	8:58			
Jefferson Point		6-22-20	10:52			
5 TURNAROUND TIME (RUSH TAT IS SUBJECT TO PDC LABS APPROVAL AND SURCHARGE) NORMAL (8-10 Bus. Days) RUSH (5 Bus. Days) Fasttrak™ (3 Bus. Days) 1-2 Bus. Days Same Day DATE DUE _____		6 The sample temperature will be measured upon receipt at the lab. By initialing this area, you request that the lab notify you, before proceeding with analysis, if the sample temperature is outside of the range of 0, 1-6, 0°C. By not initialing this area, you allow the lab to proceed with analytical testing regardless of the sample temperature.				
RESULTS BY: EMAIL FAX PHONE CALL PHONE/FAX# IF DIFFERENT FROM ABOVE		7 RELINQUISHED BY: (SIGNATURE) 				
7 RELINQUISHED BY: (SIGNATURE) 		DATE 6-22-20	TIME 11:14	RECEIVED BY: 	DATE 6-22-20	TIME 11:14
RELINQUISHED BY: (SIGNATURE)		DATE	TIME	RECEIVED BY:	DATE	TIME
RELINQUISHED BY: (SIGNATURE)		DATE	TIME	RECEIVED BY:	DATE	TIME
8 COMMENTS: (FOR LAB USE ONLY) SAMPLE TEMPERATURE UPON RECEIPT CHILL PROCESS STARTED PRIOR TO RECEIPT SAMPLE(S) RECEIVED ON ICE PROPER BOTTLES RECEIVED IN GOOD CONDITION BOTTLES FILLED WITH ADEQUATE VOLUME SAMPLE(S) RECEIVED WITHIN HOLD TIMES(S) (EXCLUDES TYPICAL FIELD PARAMETERS) DATE AND TIME TAKEN FROM SAMPLE BOTTLE		13.6°C 				

Thank you for using PDC Laboratories, Inc. Locations in Peoria, IL; St. Louis, MO; and Springfield, MO

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