Columbus

Cleveland

Dayton

August 19, 2016

Mr. Tim Gehring Director of Facilities Management Worthington City School District 250 East Wilson Bridge Road Worthington, Ohio 43085

Re: Lead in Water Testing at Kilbourne High School

1499 Hard Road, Columbus, OH 43235

Sample Date: June 30, 2016 L&A Project No: 16-0311

Dear Mr. Gehring,

Lawhon & Associates, Inc. (L&A) performed water sampling to document concentrations of lead in the potable water system. There is no federal law requiring testing of drinking water in schools, except for schools that have their own water supply and are thus regulated under the Safe Drinking Water Act (SDWA). This testing was performed as a proactive measure to ensure lead in drinking water concentrations remain at acceptable levels. L&A's conclusions and recommendations relevant to the sampling performed are presented in this document.

METHODOLOGY

L&A performed environmental sampling for Lead in water at Kilbourne High School on June 30, 2016. The sampling was conducted in accordance with the United States Environmental Protection Agency's (US EPA) guidance document "3Ts (Training, Testing, and Telling) for Reducing Lead in Drinking Water in Schools" (3Ts Guidance); however, a larger sample volume was collected due to laboratory requirements for Ohio EPA certified methods. A sampling plan was developed for the facility, which prioritized drinking water sources based on potential use and risk. Field activities included the collection of one (1) liter water samples from the first outlet off the water main, drinking fountains, kitchen sinks, and approximately 10% of classroom sinks or other potential drinking water sources. First draw samples were collected at each location. Prior to sample collection, the potable water system was not used for a minimum of 8 hours. Samples were collected by Mr. Shawen Jenkins, Ohio Department of Health (ODH) certified Lead Risk Assessor (LRA) #LA9297 and Mr. Matt Geiger, ODH certified LRA #LA9357. Samples were submitted to MASI Environmental Laboratories located in Plain City, Ohio for analysis using the EPA method SM3113B. MASI is certified by the Ohio EPA for lead in drinking water analysis.

REGULATORY ACTION LEVELS

US EPA's 3T's Guidance recommends an action level of 20 parts per billion (ppb) for lead; however, Ohio Facilities Construction Commission (OFCC) Lead Plumbing Fixture Replacement Assistance Grants Program has set an action level of 15 ppb for lead which is consistent with

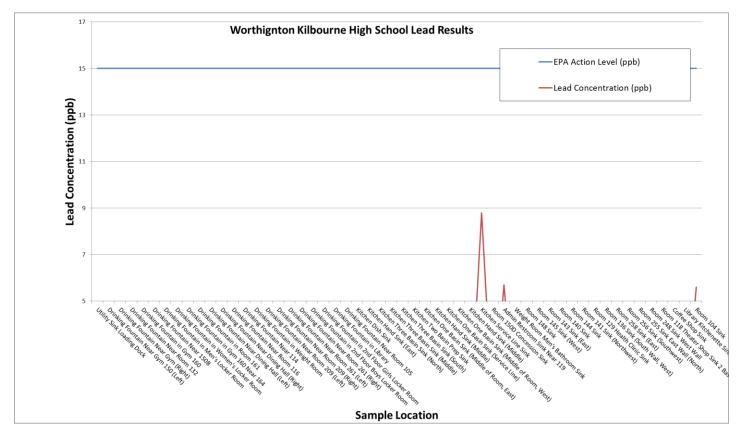
1441 King Avenue | Columbus, Ohio 43212 | P:614.481.8600 | F:614.481.8610 | www.lawhon-assoc.com

the action level for lead set by EPA's Lead and Copper Rule, under the National Primary Drinking Water Regulations (NPDWR).

For the purposes of this assessment, L&A has utilized an action level of 15 ppb lead for comparison with the laboratory analytical results.

FINDINGS

L&A collected fifty-four (54) first draw water samples at Kilbourne High School. A diagram of the sampling locations is presented in Appendix A. As illustrated in the following figure, lead was detected in 3 locations but the lead concentrations did not exceed the action level in any sample location.



A comprehensive data table is included as Appendix B. A copy of the laboratory report is included in Appendix C.

CONCLUSIONS

The results of L&A's sampling indicate Lead in Water concentrations did not exceed the action level in any location. No further action is recommended at this time.

CLOSURE

L&A has prepared this report for your use in accordance with generally accepted inspection and testing practices. The information obtained in this report is site and time specific and pertains to this project only. This inspection evaluated the conditions that were readily accessible at the time of the investigation of the subject property and does not warrant against hidden conditions or future alteration of conditions at the site, as well as subsequent changes in regulations. This report should not be construed as a full Lead Risk Assessment.

This report was prepared for the exclusive use of the Worthington City School District. No other party may rely on this report unless expressly designated by the Client in writing. The use of the report is subject to the limitations and exceptions set forth in this report, as well as the terms and conditions contained in the original contract documents. L&A will not distribute or publish this report without the Client's consent, except as required by law or court order.

Thank you for the opportunity to assist you in this important matter. If you have any questions concerning this report, please contact Shawen Jenkins or Tim Price at (614) 481-8600.

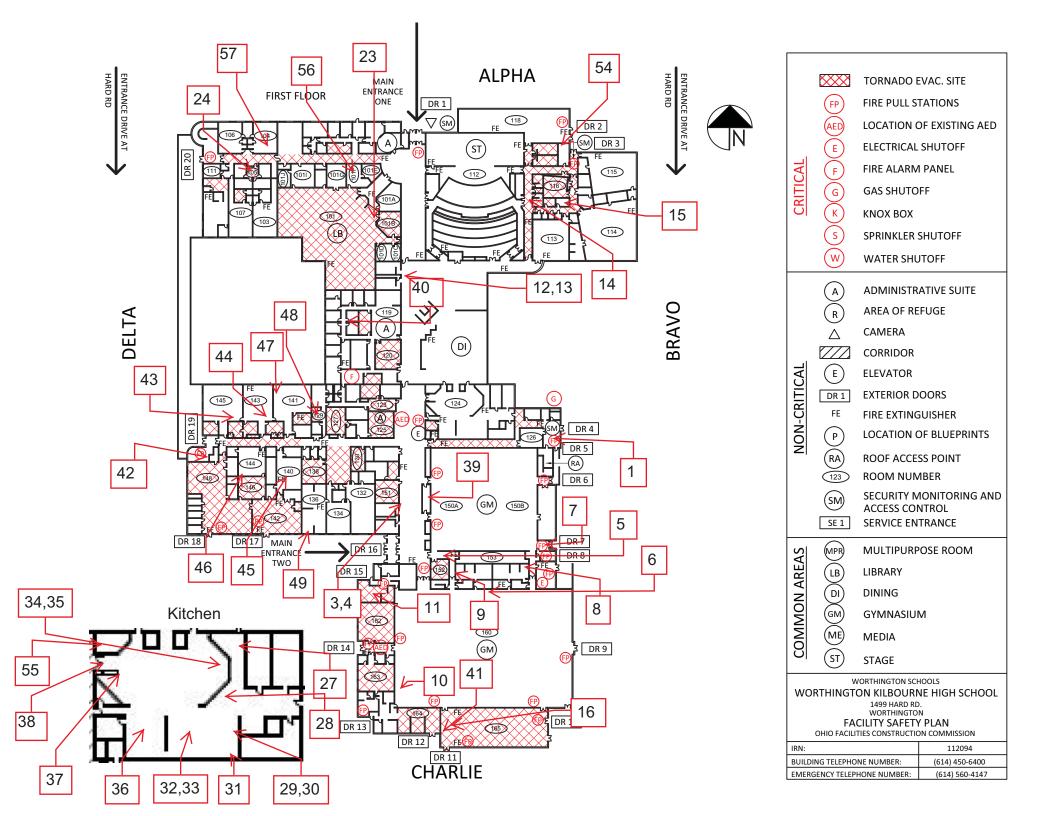
Sincerely,

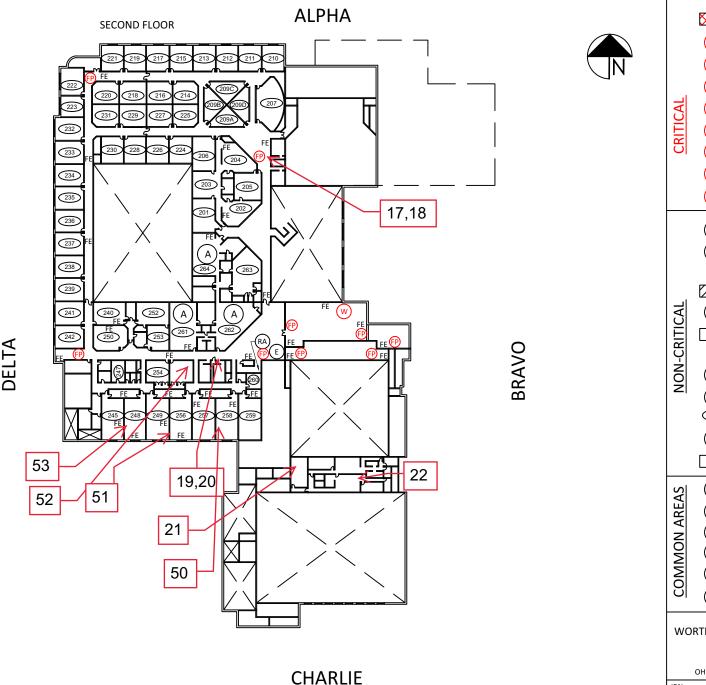
Shawen Jenkins, Lead Risk Assessor Environmental Scientist

Senior Project Manager

APPENDIX A

Sample Location Diagram





 \bowtie TORNADO EVAC. SITE FIRE PULL STATIONS LOCATION OF EXISTING AED **ELECTRICAL SHUTOFF** FIRE ALARM PANEL (G) **GAS SHUTOFF** κ KNOX BOX SPRINKLER SHUTOFF WATER SHUTOFF ADMINISTRATIVE SUITE AREA OF REFUGE **CAMERA** Δ CORRIDOR (E) **ELEVATOR EXTERIOR DOORS** DR 1 FIRE EXTINGUISHER LOCATION OF BLUEPRINTS (RA) **ROOF ACCESS POINT** 123 **ROOM NUMBER SECURITY MONITORING AND** (SM) **ACCESS CONTROL** SE 1 SERVICE ENTRANCE (MPR) MULTIPURPOSE ROOM (LB) LIBRARY (\Box) DINING (GM) **GYMNASIUM** (ME) **MEDIA** (ST) STAGE WORTHINGTON SCHOOLS WORTHINGTON KILBOURNE HIGH SCHOOL

OHIO FACILITIES CONSTRUCTION COMMISSION

IRN: 112094

BUILDING TELEPHONE NUMBER: (614) 450-6400

(614) 560-4147

1499 HARD RD. WORTHINGTON FACILITY SAFETY PLAN

EMERGENCY TELEPHONE NUMBER:

APPENDIX B

Comprehensive Data Table

Table 1: Potable Water Sampling Results

Sample ID	Sampling Site	Sample Type	Meets Non-Use Period	Recalled Fixture	Analytical Results (ppb)
KH-1	Utility Sink Loading Dock	First Draw	Yes	No	<5
KH-3	Drinking Fountain Near Gym 150 (Left)	First Draw	Yes	No	<5
KH-4	Drinking Fountain Near Gym (Right)	First Draw	Yes	No	<5
KH-5	Drinking Fountain Near Room 132	First Draw	Yes	No	<5
KH-6	Drinking Fountain in Gym 160	First Draw	Yes	No	<5
KH-7	Drinking Fountain Near 150B	First Draw	Yes	No	<5
KH-8	Drinking Fountain in Men's Locker Room	First Draw	Yes	No	<5
KH-9	Drinking Fountain in Women's Locker Room	First Draw	Yes	No	<5
KH-10	Drinking Fountain in Gym 160 Near 164	First Draw	Yes	No	<5
KH-11	Drinking Fountain in Room 161	First Draw	Yes	No	<5
KH-12	Drinking Fountain Near Dining Hall (Left)	First Draw	Yes	No	<5
KH-13	Drinking Fountain Near Dining Hall (Right)	First Draw	Yes	No	<5
KH-14	Drinking Fountain Near Room 116	First Draw	Yes	No	<5
KH-15	Drinking Fountain Near 114	First Draw	Yes	No	<5
KH-16	Drinking Fountain in Weight Room	First Draw	Yes	No	<5
KH-17	Drinking Fountain Near Room 209 (Left)	First Draw	Yes	No	<5
KH-18	Drinking Fountain Near Room 209 (Right)	First Draw	Yes	No	<5
KH-19	Drinking Fountain Near Room 261 (Left)	First Draw	Yes	No	<5
KH-20	Drinking Fountain Near Room 261 (Right)	First Draw	Yes	No	<5
KH-21	Drinking Fountain in 2nd Floor Boys Locker Room	First Draw	Yes	No	<5
KH-22	Drinking Fountain in 2nd Floor Girls Locker Room	First Draw	Yes	No	<5
KH-23	Drinking Fountain in Library	First Draw	Yes	No	<5
KH-24	Drinking Fountain Near Room 105	First Draw	Yes	No	<5
KH-27	Kitchen Dish Sink	First Draw	Yes	No	<5

Table 1: Potable Water Sampling Results (Continued)

Sample ID	Sampling Site	Sample Type	Meets Non-Use Period	Recalled Fixture	Analytical Results (ppb)
KH-28	Kitchen Hand Sink (East)	First Draw	Yes	No	<5
KH-29	Kitchen Three Basin Sink (North)	First Draw	Yes	No	<5
KH-30	Kitchen Three Basin Sink (Middle)	First Draw	Yes	No	<5
KH-31	Kitchen Three Basin Sink (South)	First Draw	Yes	No	<5
KH-32	Kitchen Two Basin Prep Sink	First Draw	Yes	No	<5
KH-33	Kitchen One Basin Sink (Middle of Room, East)	First Draw	Yes	No	<5
KH-34	Kitchen Hand Sink (Middle)	First Draw	Yes	No	<5
KH-35	Kitchen One Basin Sink (Service Line)	First Draw	Yes	No	<5
KH-36	Kitchen One Basin Sink (Middle of Room, West)	First Draw	Yes	No	<5
KH-37	Kitchen Hand Sink (Middle)	First Draw	Yes	No	<5
KH-38	Kitchen Service Line Sink	First Draw	Yes	No	8.8
KH-39	Room 150D Concession Sink	First Draw	Yes	No	<5
KH-40	Admin Restroom Sink Near 119	First Draw	Yes	No	5.7
KH-41	Weight Room Men's Bathroom Sink	First Draw	Yes	No	<5
KH-42	Room 148 Sink	First Draw	Yes	No	<5
KH-43	Room 145 Sink (West)	First Draw	Yes	No	<5
KH-44	Room 143 Sink (East)	First Draw	Yes	No	<5
KH-45	Room 140 Sink	First Draw	Yes	No	<5
KH-46	Room 144 Sink	First Draw	Yes	No	<5
KH-47	Room 141 Sink (Northwest)	First Draw	Yes	No	<5
KH-48	Room 129 Health Clinic Sink	First Draw	Yes	No	<5
KH-49	Room 136 Sink (South Wall, West)	First Draw	Yes	No	<5
KH-50	Room 258 Sink (East)	First Draw	Yes	No	<5
KH-51	Room 256 Sink (Southwest)	First Draw	Yes	No	<5

Table 1: Potable Water Sampling Results (Continued)

Sample ID	Sampling Site	Sample Type	Meets Non-Use Period	Recalled Fixture	Analytical Results (ppb)
KH-52	Room 255 Sink East Wall (North)	First Draw	Yes	No	<5
KH-53	Room 248 Sink West Wall	First Draw	Yes	No	<5
KH-54	Room 118 Theater Shop Sink 2 Basin	First Draw	Yes	No	<5
KH-55	Coffee Shop Sink	First Draw	Yes	No	<5
KH-56	Library Kitchenette Sink	First Draw	Yes	No	<5
KH-57	Room 104 Sink	First Draw	Yes	No	5.6

^{1.} Detection limit is 5.0 ppbl.

^{2.} Bold indicates lead present above detection limits.

^{3.} Highlighting indicates lead concentrations exceed the EPA Action Level.

APPENDIX C

Laboratory Analytical Reports



P.O. Box 1440 Dublin, Ohio 43017 • Phone (614) 873-4654

Certificate of Analysis Range Reprint

Page: Date: 07/15/16

0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

AR Sheet No: 0420026-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

Client No:

PWS ID No: STU ID No: PO No:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 07:00 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: KH 1 Cl2 Free: Sample Tap: UTILITY SINK LOADING DOCK Cl2 Combined:

Sample Type:

Sample Address: 1ST OF MAIN 1499 HARD RD COLUMBUS OH 43235

Sample ID:

Lab Method Analyst Date Number Number Analyzed Test Requested Test Result 51122 3113B LEAD 4792 07/05/16

<5.0 ug/1



P.O. Box 1440 Phone (614) 873-4654 Dublin, Ohio 43017 •

Certificate of Analysis Range Reprint

Page:

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

0000005911 AR Sheet No: 0420059-AR

MASI Dublin Laboratory:

County: NO COUNTY

MASI Cincinnati Laboratory: 4100

Client No:

PWS ID No: STU ID No: PO No:

Private

Chlorinated: Repeat No:

Cl2 Combined:

Cl2 Total: Cl2 Free:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16 Sample Time: 08:04

Sample Matrix: POTABLE

Sample Monitoring Point: KH 3

Sample Tap: LEFT DF NEAR GYM 150

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Test Requested Analyst Date Number Number Number Analyzed Test Result

<5.0 ug/l

LEAD

50032 3113B 4792 07/05/16



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Page:

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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420060-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

> PWS ID No: STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:06 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: KH 4 Cl2 Free: Sample Tap: DF RIGHT NEAR GYM Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result

50054 3113B 4792 07/05/16 LEAD

< 5.0 ug/l



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Page:

0000005911

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420061-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

County: NO COUNTY Sampler Name: MATT GEIGER Chlorinated:

Sample Date: 06/30/16 Sample Time: 08:08 Repeat No: Cl2 Total: Sample Matrix: POTABLE Cl2 Free: Sample Monitoring Point: KH 5 Cl2 Combined: Sample Tap: DF NEAR 132

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result 50055 3113B 4792 07/05/16

<5.0 ug/l

LEAD

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

AR Sheet No: 0420062-AR

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total:

C12 Free:

COLUMBUS OH 43212

PWS ID No: STU ID No:

Client No:

Dear Client:

PO No:

Private

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16 Sample Time: 08:10 Sample Matrix: POTABLE

Sample Monitoring Point: KH 6 Sample Tap: DF GYM RM 160 Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

LEAD 50056 3113B 4792 07/07/16

<5.0 uq/l

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1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420063-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:12 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 7 C12 Free:

Sample Tap: DF NEAR 150B Sample Type: C12 Combined:

Sample Address: 1499 HARD RD

Sample ID:

____ Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

LEAD 50057 3113B 4792 07/07/16

<5.0 uq/l

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No:

AR Sheet No: 0420064-AR

COLUMBUS OH 43212

STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:19 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 8 C12 Free: C12 Combined:

Sample Tap: DF IN MENS LOCKER RM

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

____ Lab Method Analyst Date Number Number Analyzed Test Requested

Test Result

LEAD 50060 3113B 4792 07/07/16

<5.0 uq/l

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420065-AR
MASI Dublin Laboratory: 877

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total:

C12 Free:

PWS ID No:

Private

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER Sample Date: 06/30/16

Sample Time: 08:16 Sample Matrix: POTABLE

Sample Monitoring Point: KH 9

Sample Tap: DF WOMENS PE LOCKER RM

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Metho**d** Analyst Date Number Number Number Analyze**d** Test Requested Test Result

LEAD 51117 3113B 4792 07/07/16

<5.0 u¶/1

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420000 m. MASI Dublin Laboratory: 877

PWS ID No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:18 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 10 C12 Free:

Sample Tap: DF 160 GYM NEAR 164 C12 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result

LEAD 51118 3113B 4792 07/07/16 <5.0 uq/l

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1441 KING AVENUE

MASI Cincinnati Laboratory: 4100

AR Sheet No: 0420067-AR MASI Dublin Laboratory: 877

0000005911

COLUMBUS OH 43212

Private

Client No:

PWS ID No:

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total: C12 Free:

Dear Client:

STU ID No: PO No:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16 Sample Time: 08:20 Sample Matrix: POTABLE

Sample Monitoring Point: KH 11

Sample Tap: RM 161 DF Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result

LEAD 50961 3113B 4792 07/07/16

<5.0 uq/l

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LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420068-AR
MASI Dublin Laboratory: 877

PWS ID No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:22 Repeat No: Sample Matrix: POTABLE C12 Total: C12 Free: Sample Monitoring Point: KH 12 Sample Tap: LEFT DF NEAR DINING HALL Sample Type: C12 Combined:

Sample Address: 1499 HARD RD

Sample ID:

Lab Metho**d** Analyst Date Number Number Number Analyze**d** Test Requested

Test Result

LEAD 50960 3113B 4792 07/07/16 <5.0 u**g**/1

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420069-mm MASI Dublin Laboratory: 877

Client No:

PWS ID No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:24 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 13 C12 Free: C12 Combined:

Sample Tap: RIGHT DF NEAR DINING HALL

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result

LEAD 50959 3113B 4792 07/07/16 <5.0 uq/l

MASI ENVIRONMENTAL SERVICES

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> Page: 1 Date: 07/08/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420070-AR MASI Dublin Laboratory: 877

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total: C12 Free:

MASI Cincinnati Laboratory: 4100 PWS ID No:

Private

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER Sample Date: 06/30/16

Sample Time: 08:26 Sample Matrix: POTABLE Sample Monitoring Point: KH 16

Sample Tap: DF NEAR 116

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 50734 3113B 4792 07/07/16

<5.0 u¶/1

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> Page: Date: 07/08/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420071-AR MASI Dublin Laboratory: 877

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total: C12 Free:

MASI Cincinnati Laboratory: 4100

PWS ID No:

Private

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16 Sample Time: 08:28 Sample Matrix: POTABLE

Sample Monitoring Point: KH 15

Sample Tap: DF NEAR 114 Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

____. Test Requested

Lab Method Analyst Date Number Number Analyzed Test Result

LEAD 50730 3113B 4792 07/07/16

<5.0 uq/1

MASI ENVIRONMENTAL SERVICES

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> Page: Date: 07/08/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420072-AR

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total: C12 Free:

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No:

Private

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16 Sample Time: 08:30 Sample Matrix: POTABLE

Sample Monitoring Point: KH 16

Sample Tap: WEIGHT RM DF Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

LEAD 50724 3113B 4792 07/07/16

<5.0 uq/1

MASI ENVIRONMENTAL SERVICES

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1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420079-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:32 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 17 C12 Free:

Sample Tap: LEFT DF NEAR 209 Sample Type: C12 Combined:

Sample Address: 1499 HARD RD

Sample ID:

____. Lab Method Analyst Date Number Number Number Analyzed Test Requested

Test Result

LEAD 50721 3113B 4792 07/07/16

<5.0 uq/1

MASI ENVIRONMENTAL SERVICES

P. O. Box 1440 Dublin, Ohio 43017 (614) 873-4654

> Page: Date: 07/08/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 04200/6 m.
MASI Dublin Laboratory: 877

PWS ID No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:34 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 18 C12 Free: C12 Combined:

Sample Tap: RIGHT DF NEAR RM 209 Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

______ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result

LEAD 50714 3113B 4792 07/07/16 <5.0 uq/1

MASI ENVIRONMENTAL SERVICES

P.O. Box 1440 Dublin, Ohio 43017 (614) 873-4654

> Page: 1 Date: 07/08/16

LAWHON & ASSOCIATES, INC.
CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911
AR Sheet No: 0420077-AR
MASI Dublin Laboratory: 877
MASI Cincinnati Laboratory: 4100

County: NO COUNTY

PWS ID No:

Private

Chlorinated:

C12 Combined:

Repeat No:

C12 Total:

C12 Free:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16
Sample Time: 08:36
Sample Matrix: POTABLE
Sample Monitoring Point: KH 19
Sample Tap: DF NEAR 261 LEFT

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 50709 3113B 4792 07/07/16

<5.0 u**g**/1

MASI ENVIRONMENTAL SERVICES

P. O. Box 1440 Dublin, Ohio 43017 (614) 873-4654

> Page: Date: 07/08/16

> > 0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420076-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No:

STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:38 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 20 C12 Free: C12 Combined:

Sample Tap: DF NEAR 261 RIGHT

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_____ Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

LEAD 50705 3113B 4792 07/07/16

<5.0 uq/1

MASI ENVIRONMENTAL SERVICES

P. O. Box 1440 Dublin, Ohio 43017 (614) 873-4654

> Page: Date: 07/08/16

> > 0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420075-AR
MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No:

Client No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:40 Repeat No: Sample Matrix: POTABLE C12 Total: C12 Free: Sample Monitoring Point: KH 21 C12 Combined:

Sample Tap: 2ND FLOOR BOYS LOCKER RM Sample Type:

Sample Address: DF 1499 HARD RD

Sample ID:

Lab Metho**d** Analyst Date Number Number Number Analyze**d** Test Requested Test Result

LEAD 50699 3113B 4792 07/07/16

<5.0 u**g**/1

MASI ENVIRONMENTAL SERVICES

P. O. Box 1440 Dublin, Ohio 43017 (614) 873-4654

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> > 0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

Client No:

COLUMBUS OH 43212

AR Sheet No: 04200/4 m.
MASI Dublin Laboratory: 877 PWS ID No:

> STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: MATT GEIGER County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 08:40 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: KH 22 C12 Free: Sample Tap: 2ND FL GIRLS LOCKER RM DF C12 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

____ Lab Method Analyst Date Number Number Number Analyzed Test Requested

Test Result

LEAD 50677 3113B 4792 07/07/16

<5.0 uq/1

MASI ENVIRONMENTAL SERVICES

P. O. Box 1440 Dublin, Ohio 43017 (614) 873-4654

> Page: Date: 07/08/16

> > 0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420073-AR MASI Dublin Laboratory: 877

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total: C12 Free:

MASI Cincinnati Laboratory: 4100 PWS ID No:

Client No:

STU ID No: PO No:

Private

Dear Client:

Along with your results listed below we would like to thank you for

allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16 Sample Time: 08:42

Sample Matrix: POTABLE

Sample Monitoring Point: KH 23

Sample Tap: LIBRARY DF Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

____.

Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result

LEAD 51120 3113B 4792 07/07/16

<5.0 uq/1

MASI ENVIRONMENTAL SERVICES

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420080-AR MASI Dublin Laboratory: 877

County: NO COUNTY

Chlorinated:

C12 Combined:

Repeat No:

C12 Total: C12 Free:

MASI Cincinnati Laboratory: 4100

PWS ID No:

Private

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: MATT GEIGER

Sample Date: 06/30/16 Sample Time: 08:44 Sample Matrix: POTABLE

Sample Monitoring Point: KH 24

Sample Tap: DF AT 105 Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result

LEAD 51121 3113B 4792 07/07/16

<5.0 uq/1



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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420028-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

> PWS ID No: STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Sample Time: 07:02 Chlorinated: Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: KH 27 Cl2 Free: Cl2 Combined: Sample Tap: KITCH DISH SINK

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

__________ Lab Method Analyst Date Number Number Number Analyzed Test Requested

Test Result

51123 3113B 4792 07/05/16 <5.0 uq/1



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Date: 07/15/16

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420029-AR MASI Dublin Laboratory: 877

Cl2 Combined:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 07:04 Repeat No: Sample Matrix: POTABLE Cl2 Total: Cl2 Free: Sample Monitoring Point: KH 28

Sample Tap: KITCH HAND SINK EAST

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_____ Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

LEAD 51124 3113B 4792 07/05/16 < 5.0 ug/l

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Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420030-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

> PWS ID No: STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated:
Sample Time: 07:06 Repeat No:
Sample Matrix: POTABLE Cl2 Total:
Sample Monitoring Point: KH 29 Cl2 Free:
Sample Tap: KITCH 3 BASIN SINK NORTH Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 51125 3113B 4792 07/05/16

<5.0 ug/l

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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420031-AR MASI Dublin Laboratory:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 07:08 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: KH 30 Cl2 Free: Sample Tap: KITCH 3 BASIN SINK MIDDLE Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_____ Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

LEAD <5.0 uq/1

50668 3113B 4792 07/05/16



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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420032-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

> PWS ID No: STU ID No:

PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

County: NO COUNTY Sampler Name: SHAWEN JENKINS

Chlorinated: Sample Date: 06/30/16 Sample Time: 07:10 Repeat No: Sample Matrix: POTABLE Cl2 Total: Cl2 Free: Sample Monitoring Point: KH 31 Sample Tap: KITCH 3 BASIN SINK SOUTH Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Analyst Date Number Number Number Analyzed Test Requested

Test Result

50663 3113B 4792 07/05/16

< 5.0 ug/l

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4792 07/05/16

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

0000005911 AR Sheet No: 0420033-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

Chlorinated:

Cl2 Combined:

Repeat No: Cl2 Total:

Cl2 Free:

PWS ID No: STU ID No: PO No:

Client No:

COLUMBUS OH 43212

Dear Client:

MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private County: NO COUNTY

Sampler Name: SHAWEN JENKINS

Sample Date: 06/30/16 Sample Time: 07:12 Sample Matrix: POTABLE

Sample Monitoring Point: KH 32

Sample Tap: KITCH 2 BASIN PREP SINK

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_____ Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

50660 3113B

Along with your results listed below we would like to thank you for allowing

<5.0 ug/l



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Page: 1

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

Client No: 0000005911 AR Sheet No: 0420034-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Sample Time: 07:14 Chlorinated: Repeat No: Cl2 Total: Sample Matrix: POTABLE Sample Monitoring Point: KH 33 Cl2 Free: Sample Tap: KITCH 1 BASIN MIDDLE OF Cl2 Combined:

Sample Type:

Sample Address: RM EAST 1499 HARD RD

Sample ID:

______ Lab Method Analyst Date Number Number Analyzed Test Requested

Test Result

50656 3113B 4792 07/05/16 LEAD < 5.0 ug/l

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Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE Client No: 0000005911 AR Sheet No: 0420035-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16

Sample Time: 07:16

Sample Matrix: POTABLE

Sample Monitoring Point: KH 34

Sample Tap: KITCH HAND SINK MIDDLE

Chlorinated:
Repeat No:
Cl2 Total:
Cl2 Free:
Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 50640 3113B 4792 07/05/16

<5.0 ug/1



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Page: 1

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420036-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated:
Sample Time: 07:18 Repeat No:
Sample Matrix: POTABLE Cl2 Total:
Sample Monitoring Point: KH 35 Cl2 Free:
Sample Tap: KITCH 1 BASIN SERVICELINE Cl2 Combined:

Sample Type:

Sample Address: SINK EAST 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 50624 3113B 4792 07/05/16

<5.0 ug/l



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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

Client No: 0000005911 AR Sheet No: 0420037-AR MASI Dublin Laboratory:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 07:20 Repeat No: Sample Matrix: POTABLE Cl2 Total: Cl2 Free: Sample Monitoring Point: KH 36 Sample Tap: KITCH 1 BASIN MIDDLE OF Cl2 Combined:

Sample Type:

Sample Address: RM WEST 1499 HARD RD

Sample ID:

Test Requested

Lab Method Analyst Date Number Number Analyzed Test Result

4792 07/05/16 50610 3113B LEAD

<5.0 uq/1



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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420038-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 07:22 Repeat No: Sample Matrix: POTABLE Cl2 Total: Cl2 Free: Sample Monitoring Point: KH 37

Sample Tap: KITCH HAND SINK WEST Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_____ Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

50595 3113B LEAD 4792 07/05/16 <5.0 ug/1

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Page:

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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

AR Sheet No: 0420039-AR MASI Dublin Laboratory:

COLUMBUS OH 43212

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Sample Time: 07:24 Chlorinated: Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: KH 38 Cl2 Free: Cl2 Combined:

Sample Tap: KITCH SERVICE LINE SINK

Sample Type:

Sample Address: WEST 1499 HARD RD

Sample ID:

_____ Lab Method Test Requested Analyst Date Number Analyzed Test Result Number Number *

51126 3113B 4792 07/05/16 LEAD

 $8.8 \, \text{ug/l}$



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Page: 1

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420040-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No:

STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16

Sample Time: 07:26

Sample Matrix: POTABLE

Sample Monitoring Point: KH 39

Sample Tap: RM 150 D CONCESSION SINK

Chlorinated:
Repeat No:
Cl2 Total:
Cl2 Free:
Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 51127 3113B 4792 07/05/16

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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420041-AR
MASI Dublin Laboratory: 877
MASI Cincipnati Laboratory: 4100

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16

Sample Time: 07:28

Sample Matrix: POTABLE

Sample Monitoring Point: KH 40

Sample Tap: ADMIN RR SINK NEAR 119

Chlorinated:
Repeat No:
Cl2 Total:
Cl2 Free:
Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 51128 3113B 4792 07/05/16

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Page: 1 Date: 07/15/16

4792 07/05/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

Client No: 0000005911
AR Sheet No: 0420042-AR
MASI Dublin Laboratory: 877
MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

COLUMBUS OH 43212

Dear Client:

MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Along with your results listed below we would like to thank you for allowing

Sample Date: 06/30/16

Sample Time: 07:30

Sample Matrix: POTABLE

Sample Monitoring Point: KH 41

Cl2 Free:

Sample Monitoring Point: KH 41 Cl2 Free: Sample Tap: WEIGHT RM MENS BATH SINK Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

rest Result Number Number Number Analyzed

51129 3113B

LEAD <5.0 ug/l



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Date: 07/15/16

4792 07/05/16

0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420043-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated:
Sample Time: 07:32 Repeat No:
Sample Matrix: POTABLE Cl2 Total:

Sample Monitoring Point: KH 92 Cl2 Free:
Sample Tap: RM 148 SINK Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

<5.0 ug/1

LEAD

50041 3113B

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Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

Client No: 0000005911 AR Sheet No: 0420044-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Cl2 Combined:

COLUMBUS OH 43212

Dear Client:

MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Along with your results listed below we would like to thank you for allowing

Sample Date: 06/03/16 Sample Time: 07:34 Chlorinated: Repeat No: Sample Matrix: POTABLE Cl2 Total: Cl2 Free: Sample Monitoring Point: KH 43

Sample Tap: RM 145 WEST SINK Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

-Test Requested

Lab Method Analyst Date Number Number Analyzed Test Result

50035 3113B 4792 07/05/16

< 5.0 ug/1



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Page: 1 Date: 07/15/16

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

AR Sheet No: 0420045-AR
MASI Dublin Laboratory: 877
MASI Cincinnati Laboratory: 4100

Client No:

PO No:

PWS ID No: STU ID No:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16

Sample Time: 07:36

Sample Matrix: POTABLE

Sample Monitoring Point: KH 44

Sample Tap: RM 143 EAST SINK

Cl2 Combined:

Sample Tap: RM 143 EAST SINK Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested

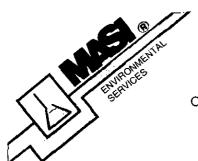
Lab Method Analyst Date

Number Number Number Analyzed

LEAD

50042 3113B 4792 07/05/16

<5.0 ug/l



Certificate of Analysis Range Reprint

Page: Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420046-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

> PWS ID No: STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Chlorinated: Sample Time: 07:38 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: KH 45 Cl2 Free: Sample Tap: RM 140 SINK Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_ Lab Method Analyst Date Number Number Number Analyzed Test Requested

Test Result

LEAD 50043 3113B 4792 07/05/16 <5.0 ug/1

Public Drinking Water Analysis Results, as Required by OEPA,

are Reported Following Final QA/QC



Certificate of Analysis Range Reprint

Page:

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420047-AR MASI Dublin Laboratory:

Client No:

MASI Cincinnati Laboratory: 4100

0000005911

PWS ID No: STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Sample Time: 07:40 Chlorinated: Repeat No:

Cl2 Total: Sample Matrix: POTABLE Cl2 Free: Sample Monitoring Point: KH 48 Sample Tap: RM 144 SINK Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

50044 3113B 4792 07/05/16 LEAD

< 5.0 ug/l



P.O. Box 1440 Phone (614) 873-4654

Certificate of Analysis Range Reprint

Page:

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

0000005911

1441 KING AVENUE

AR Sheet No: 0420048-AR MASI Dublin Laboratory: MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Private

Chlorinated: Repeat No:

Cl2 Combined:

Cl2 Total:

Cl2 Free:

County: NO COUNTY

Client No:

COLUMBUS OH 43212

Dear Client:

MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: SHAWEN JENKINS

Sample Date: 06/30/16 Sample Time: 07:42 Sample Matrix: POTABLE

Sample Monitoring Point: KH 47

Sample Tap: RM 141 SINK NORTH WEST

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Along with your results listed below we would like to thank you for allowing

Lab Method Test Requested Analyst Date Number Number Number Analyzed Test Result ------

LFAD 50045 3113B 4792 07/05/16

< 5.0 ug/l



Certificate of Analysis Range Reprint

Page: 1

4792 07/05/16

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

TIMBLE OF 42212

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0420049-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

> PWS ID No: STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16

Sample Time: 07:44

Sample Matrix: POTABLE

Sample Monitoring Point: KH 48

Sample Tap: RM 129 HEALTH CLINIC SINK

Chlorinated:
Repeat No:
Cl2 Total:
Cl2 Free:
Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

Test Result Number Number Number Analyzed

50046 3113B

<5.0 ug/l

LEAD



Certificate of Analysis Range Reprint

Page:

Date: 07/15/16

0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON

AR Sheet No: 0420050-AR

1441 KING AVENUE

COLUMBUS OH 43212

MASI Dublin Laboratory: MASI Cincinnati Laboratory: 4100

> PWS ID No: STU ID No:

PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16 Sample Time: 07:46 Chlorinated: Repeat No: Cl2 Total: Sample Matrix: POTABLE Sample Monitoring Point: KH 49 Cl2 Free: Sample Tap: RM 136 C Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

<u>-</u>

Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

50047 3113B 4792 07/05/16 LEAD

<5.0 ug/1



Certificate of Analysis Range Reprint

Page: 1

0000005911

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

AR Sheet No: 0420051-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

Client No:

PWS ID No: STU ID No: PO No:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16

Sample Time: 07:48

Sample Matrix: POTABLE

Sample Monitoring Point: KH 50

Sample Tap: RM 258 SINK EAST

Chlorinated:
Repeat No:
Cl2 Total:
Cl2 Free:
Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

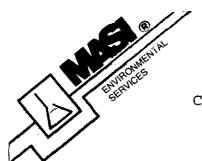
Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

<5.0 ug/l

LEAD

50048 3113B 4792 07/05/16



P.O. Box 1440 • Dublin, Ohio 43017

Phone (614) 873-4654

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Page: 1 Date: 07/15/16

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LAWHON & ASSOCIATES, INC. CHUCK WILSON

AR Sheet No: 0420052-AR MASI Dublin Laboratory:

Client No:

1441 KING AVENUE MASI Dublin Laboratory: 877
MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

COLUMBUS OH 43212

Dear Client:

MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Along with your results listed below we would like to thank you for allowing

Sample Date: 06/30/16 Chlorinated:
Sample Time: 07:50 Repeat No:
Sample Matrix: POTABLE Cl2 Total:
Sample Monitoring Point: KH 51 Cl2 Free:

Sample Tap: RM 256 SINK SOUTH WEST C12 Free: C12 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested

Lab Method Analyst Date

Test Result

Number Number Number Analyzed

LEAD

50049 3113B

4792 07/05/16

<5.0 ug/1



Certificate of Analysis Range Reprint

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0000005911

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420053-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

County: NO COUNTY

Chlorinated: Repeat No:

Cl2 Combined:

Cl2 Total: Cl2 Free:

PWS ID No: STU ID No: PO No:

Private

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: SHAWEN JENKINS

Sample Date: 06/30/16 Sample Time: 07:52 Sample Matrix: POTABLE

Sample Monitoring Point: KH 52

Sample Tap: RM 255 EAST WALL NORTH

Sample Type:

Sample Address: 1499 HARD RD

Sample ID: -----Test Requested

Lab Method Analyst Date Number Number Analyzed Test Result

LEAD <5.0 uq/1 50050 3113B 4792 07/05/16



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Page:

0000005911

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

AR Sheet No: 0420054-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Client No:

COLUMBUS OH 43212

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Chlorinated: Sample Date: 06/30/16 Sample Time: 07:54 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: KH 53 Cl2 Free: Sample Tap: RM 248 WEST WALL Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

-

Lab Method Analyst Date Number Number Analyzed Test Requested Test Result

4792 07/05/16 50051 3113B LEAD

< 5.0 ug/l



Certificate of Analysis Range Reprint

Page:

0000005911

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420055-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No: PO No:

Client No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: SHAWEN JENKINS

Sample Date: 06/30/16 Sample Time: 07:56

Sample Matrix: POTABLE Sample Monitoring Point: KH 54

Sample Tap: RM 118 THEATR SHOP SINK 2

Sample Type:

Sample Address: BASIN 1499 HARD RD

Sample ID:

Private

County: NO COUNTY

Chlorinated: Repeat No: Cl2 Total: Cl2 Free:

Cl2 Combined:

_____ Lab Method Analyst Date Number Number Analyzed Test Requested Test Result 50052 3113B 4792 07/05/16 LEAD <5.0 ug/1



Certificate of Analysis Range Reprint

Page: 1

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE Client No: 0000005911
AR Sheet No: 0420056-AR
MASI Dublin Laboratory: 877
MASI Cincinnati Laboratory: 4100

COLUMBUS OH 43212

PWS ID No: STU ID No: PO No:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY

Sample Date: 06/30/16

Sample Time: 07:58

Sample Matrix: POTABLE

Sample Monitoring Point: KH 55

Sample Tap: COFFEE SHOP SINK

Chlorinated:
Repeat No:
Cl2 Total:
Cl2 Free:
Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 50053 3113B 4792 07/05/16

<5.0 ug/l



Certificate of Analysis Range Reprint

Page: 1

Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

COLUMBUS OH 43212

0000005911 AR Sheet No: 0420057-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

County: NO COUNTY

PWS ID No: STU ID No:

Client No:

PO No:

Private

Chlorinated:

Cl2 Combined:

Repeat No:

Cl2 Total:

Cl2 Free:

Dear Client:

Along with your results listed below we would like to thank you for allowing MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC.

Sampler Name: SHAWEN JENKINS

Sample Date: 06/30/16 Sample Time: 08:00

Sample Matrix: POTABLE

Sample Monitoring Point: KH 56

Sample Tap: LIBRARY KITCHENETTE SINK

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

_____ Lab Method Analyst Date Number Number Analyzed Test Requested

Test Result

50030 3113B LEAD 4792 07/05/16

<5.0 uq/1



Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON

1441 KING AVENUE

Client No: 0000005911
AR Sheet No: 0420058-AR
MASI Dublin Laboratory: 877
MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Repeat No: Cl2 Total:

COLUMBUS OH 43212

Dear Client:

MASI to assist you with your environmental testing requirements.

Account Name: LAWHON & ASSOCIATES, INC. Private

Sampler Name: SHAWEN JENKINS County: NO COUNTY Sample Date: 06/30/16 Chlorinated:

Along with your results listed below we would like to thank you for allowing

Sample Date: 06/30/16
Sample Time: 08:02
Sample Matrix: POTABLE

Sample Monitoring Point: KH 57 Cl2 Free: Sample Tap: RM 104 SINK Cl2 Combined:

Sample Type:

Sample Address: 1499 HARD RD

Sample ID:

Test Requested Lab Method Analyst Date

Test Requested Lab Method Analyst Date
Test Result Number Number Number Analyzed

LEAD 50031 3113B 4792 07/05/16

 $5.6 \, \text{ug/l}$