

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 Thomas Worthington High School 300 West Dublin Granville Road, Worthington, OH 43085 Sample Date: June 29, 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 Thomas Worthington High School on June 29, 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 first draw water sample from the first outlet off the water main, drinking fountains, kitchen sinks, and approximately 10% of classroom sinks or other potential drinking water sources. Prior to sample collection, the potable water system was not used for a minimum of 8 hours. Flushed samples were collected and submitted for analysis only if the first draw sample from the same fixture exceeded the US EPA Action Level. 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 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 seventy-four (74) first draw water samples at Thomas Worthington High School. A diagram of the sampling locations is presented in Appendix A. As illustrated on the following graph, lead was detected at concentrations exceeding the action level in the first draw samples from the following sampling locations.

Room 019 Sink (18.9 μg/L)

ILes, Riene

- Kitchen Concession Sink (33.2 µg/L)
- Kitchen Sprayer West Wall (22.1 µg/L)
- Kitchen Sprayer South Wall (27.6 µg/L)
- Room 248 Home EC North Sink West Wall (15.4 µg/L)



Sample Location

L&A collected and submitted flush samples for each location where lead was detected in excess of the action level in the corresponding first draw sample. As illustrated on the following graph, the lead concentrations in all flush samples collected were reported below the action level.



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 that the following locations had lead concentrations found in excess of the action level in the first draw samples but below the action level in the following flush samples, indicating that the source of lead is likely in the faucet/fixture itself or the plumbing connecting the fixture to the lateral, and very little lead is likely coming from the plumbing upstream of the faucet/fixture:

- Room 019 Sink
- Kitchen Concession Sink
- Kitchen Sprayer West Wall
- Kitchen Sprayer South Wall
- Room 248 Home EC North Sink West Wall

Based on the results, L&A recommends cleaning out the filters/aerator screens, replacing any lead containing components, or replacing the entire fixture and retesting to confirm that the lead in water concentration no longer exceeds the action level.

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,

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Shawen Jenkins, Lead Risk Assessor Environmental Scientist

Jum Prin

Tim Price Senior Project Manager

APPENDIX A

Sample Location Diagram







BRAVO

APPENDIX B

Comprehensive Data Table

Sample ID	Sampling Site	Sample Type	Meets Non-Use Period	Recalled Fixture	Analytical Results (ppb)
TWH-1	Room 019 Sink	First Draw	Yes	No	18.9
TWH-2	Room 019 Sink	Flush	Yes	No	<5
TWH-3	Drinking Fountain Near 120	First Draw	Yes	No	<5
TWH-4	Drinking Fountain Near Room 129	First Draw	Yes	No	<5
TWH-5	Drinking Fountain Near Library	First Draw	Yes	No	<5
TWH-6	Drinking Fountain Near Room 140	First Draw	Yes	No	<5
TWH-7	Drinking Fountain Near 196 (Right)	First Draw	Yes	No	<5
TWH-8	Drinking Fountain Near 196 (Left)	First Draw	Yes	No	<5
TWH-9	Drinking Fountain in Main Hall (Left)	First Draw	Yes	No	<5
TWH-10	Drinking Fountain in Main Hall (Right)	First Draw	Yes	No	<5
TWH-11	Drinking Fountain in Main Entrance (First)	First Draw	Yes	No	<5
TWH-12	Drinking Fountain in Main Entrance (Second)	First Draw	Yes	No	<5
TWH-13	Drinking Fountain in Main Entrance (Third)	First Draw	Yes	No	<5
TWH-14	Drinking Fountain in Main Entrance (Fourth)	First Draw	Yes	No	<5
TWH-15	Drinking Fountain in Gym 111	First Draw	Yes	No	<5
TWH-16	Drinking Fountain in Gym 111	First Draw	Yes	No	<5
TWH-17	Drinking Fountain in Gym 111	First Draw	Yes	No	<5
TWH-18	Drinking Fountain in Weight Room (Left)	First Draw	Yes	No	<5
TWH-19	Drinking Fountain in Weight Room (Right)	First Draw	Yes	No	<5
TWH-20	Drinking Fountain in Girls Locker Room	First Draw	Yes	No	<5
TWH-21	Drinking Fountain in Boys Locker Room (Right)	First Draw	Yes	No	<5
TWH-22	Drinking Fountain in Boys Locker Room (Middle)	First Draw	Yes	No	<5
TWH-23	Drinking Fountain in Boys Locker Room (Left)	First Draw	Yes	No	<5
TWH-24	Drinking Fountain in Gym 112	First Draw	Yes	No	<5

Table 1: Potable Water Sampling Results

Sample ID	Sampling Site	Sample Type	Meets Non-Use Period	Recalled Fixture	Analytical Results (ppb)
TWH-25	Drinking Fountain in Basement Near 019	First Draw	Yes	No	<5
TWH-26	Drinking Fountain in Back Hall Near 144	First Draw	Yes	No	<5
TWH-27	Drinking Fountain Near Room 178 (Left)	First Draw	Yes	No	<5
TWH-28	Drinking Fountain Near Room 178 (Right)	First Draw	Yes	No	<5
TWH-29	Drinking Fountain Near Room 174 (Left)	First Draw	Yes	No	<5
TWH-30	Drinking Fountain Near Room 174 (Right)	First Draw	Yes	No	<5
TWH-31	Drinking Fountain in Room 159	First Draw	Yes	No	<5
TWH-32	Drinking Fountain in Cafeteria (Left)	First Draw	Yes	No	<5
TWH-33	Drinking Fountain in Cafeteria (Right)	First Draw	Yes	No	<5
TWH-34	Drinking Fountain Near Room 276 (Right)	First Draw	Yes	No	<5
TWH-35	Drinking Fountain Near Room 276 (Left)	First Draw	Yes	No	<5
TWH-36	Drinking Fountain Near Room 280 (Right)	First Draw	Yes	No	<5
TWH-37	Drinking Fountain Near Room 280 (Left)	First Draw	Yes	No	<5
TWH-38	Drinking Fountain Near Room 283 (Right)	First Draw	Yes	No	<5
TWH-39	Drinking Fountain Near Room 283 (Left)	First Draw	Yes	No	<5
TWH-40	Drinking Fountain Near Room 230 (Left)	First Draw	Yes	No	<5
TWH-41	Drinking Fountain Near Room 230 (Right)	First Draw	Yes	No	<5
TWH-42	Drinking Fountain Near Room 229	First Draw	Yes	No	<5
TWH-43	Drinking Fountain Near Room 220	First Draw	Yes	No	<5
TWH-45	Room 20 Sink	First Draw	Yes	No	<5
TWH-46	Athletic Office Bathroom Sink	First Draw	Yes	No	<5
TWH-47	Library Kitchenette Sink	First Draw	Yes	No	<5
TWH-48	Kitchenette Sink General	First Draw	Yes	No	<5
TWH-49	Kitchen Concession Sink	First Draw	Yes	No	33.2

Table 1 Continued: Potable Water Sampling Results

Sample ID	Sampling Site	Sample Type	Meets Non-Use Period	Recalled Fixture	Analytical Results (ppb)
TWH-50	Room 156 East Wall	First Draw	Yes	No	<5
TWH-51	Room 167 Sink South Wall (West)	First Draw	Yes	No	5.1
TWH-52	Kitchen Corner Sink Northeast	First Draw	Yes	No	<5
TWH-53	Room 168 Sink South Wall (West)	First Draw	Yes	No	<5
TWH-54	Kitchen Sink West Wall (North)	First Draw	Yes	No	9.4
TWH-55	Kitchen Sink West Wall (Middle)	First Draw	Yes	No	<5
TWH-56	Kitchen Sprayer West Wall	First Draw	Yes	No	22.1
TWH-57	Kitchen Sink South Wall	First Draw	Yes	No	11
TWH-58	Kitchen Sprayer South Wall	First Draw	Yes	No	27.6
TWH-59	Kitchen Sink Southwest Corner	First Draw	Yes	No	10.2
TWH-60	Kitchen Servery Sink (South)	First Draw	Yes	No	<5
TWH-61	Kitchen Servery Sink (North)	First Draw	Yes	No	<5
TWH-62	Room 172 Sink South Wall (East)	First Draw	Yes	No	<5
TWH-63	Room 176 Sink North Wall (Middle)	First Draw	Yes	No	<5
TWH-64	Room 177 Sink South Wall	First Draw	Yes	No	<5
TWH-65	Room 185 Sink South Wall	First Draw	Yes	No	12.8
TWH-66	Room 190 Sink West	First Draw	Yes	No	<5
TWH-67	Men's Restroom Near 197 (East)	First Draw	Yes	No	<5
TWH-68	Room 183 Teacher Sink	First Draw	Yes	No	12.3
TWH-69	Room 172 Sink North Wall (East)	First Draw	Yes	No	<5
TWH-70	Restroom Sink by Room 220 (East)	First Draw	Yes	No	<5
TWH-71	Room 250 Sink	First Draw	Yes	No	8.0
TWH-72	Room 248 Home Ec North Sink South Wall	First Draw	Yes	No	<5
TWH-73	Room 248 Home Ec North Sink West Wall	First Draw	Yes	No	15.4

Table 1 Continued: Potable Water Sampling Results

Sample ID	Sampling Site	Sample Type	Meets Non-Use Period	Recalled Fixture	Analytical Results (ppb)	
TWH-74	Room 241 Sink	First Draw	Yes	No	<5	
TWH-75	Custodial Sink Near 230	First Draw	Yes	No	<5	
TWH-76	Men's Restroom Near 219	First Draw	Yes	No	5.7	
TWH-77	Kitchen Concession Sink	Flush	Yes	No	7.5	
TWH-78	Kitchen Sprayer West Wall	Flush	Yes	No	<5	
TWH-79	Kitchen Sprayer South Wall	Flush	Yes	No	<5	
TWH-80	Room 248 Home Ec North Sink West Wall	Flush	Yes	No	<5	
1 Detection limit is 5.0 pph						

2. Bold indicates lead present above detection limits.

3. Highlighting indicates lead concentrations exceed the EPA Action Level.

APPENDIX C

Laboratory Analytical Reports

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Phone (614) 873-4654

Client No: 0000005911

AR Sheet No: 0418661-AR

MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No:

PO No:

•

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Chlorinated: Sample Time: 07:00 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 1 Cl2 Free: Sample Tap: RM 019 SINK Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE RD WORTHINGTON OH 43085 Sample ID: ----Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ 50448 3113B LEAD 4792 07/05/16 $18.9 \, ug/l$

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Certificate of Analysis Range Reprint LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 0000005911 AR Sheet No: 0418663-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 Chlorinated: Sample Date: 06/29/16 Sample Time: 07:04 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: GWH 3 Cl2 Free: Cl2 Combined: Sample Tap: DF NEAR RM 120 Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result 50339 3113B 4792 07/05/16 LEAD <5.0 ug/l

> Public Drinking Water Analysis Results, as Required by OEPA, are Reported Following Final QA/QC

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Dublin, Ohio 43017 • Phone (614) 873-4654

Page:

Date: 07/15/16

1

Certificate of Analysis - Fax Copy MASI ENVIRONMENTAL SERVICES P.O. Box 1440 Dublin, Ohio 43017 (614) 873-4654 Page: 1 Date: 07/19/16 LAWHON & ASSOCIATES, INC. Client No: 0000005911 CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 07:06 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 4 C12 Free: Sample Tap: DF NEAR RM 129 C12 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ _____ LEAD 50340 3113B 4792 07/05/16 <5.0 ug/l

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P.O. Box 1440 Dublin, Ohio 43017 • Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: 0000005911 LAWHON & ASSOCIATES, INC. AR Sheet No: 0418666-AR CHUCK WILSON MASI Dublin Laboratory: 877 1441 KING AVENUE MASI Cincinnati Laboratory: 4100 PWS ID No: COLUMBUS OH 43212 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: 06/29/16 Chlorinated: Sample Time: 07:10 Repeat No: Cl2 Total: Sample Matrix: POTABLE Sample Monitoring Point: TWH 6 Cl2 Free: Sample Tap: DF NEAR RM 140 Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result 4792 07/05/16 50350 3113B LEAD <5.0 ug/1

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0418667-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: 877

MASI Dublin Laboratory:

PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:12 Sample Matrix: POTABLE Sample Monitoring Point: TWH 7 Sample Tap: DF NEAR RM 196 RIGHT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorina Repeat I Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: pined:	ТҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50355	3113B		4792	07/05/16

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P.O. Box 1440 Dublin, Ohio 43017 • Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: LAWHON & ASSOCIATES, INC. 0000005911 AR Sheet No: 0418668-AR CHUCK WILSON 1441 KING AVENUE MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 07:14 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 8 Cl2 Free: Sample Tap: LEFT DF NEAR RM 196 Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 50378 3113B 4792 07/05/16 <5.0 uq/l



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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0418669-AR

MASI Dublin Laboratory:

PO No:

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No:

Phone (614) 873-4654

877

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:16 Sample Matrix: POTABLE Sample Monitoring Point: TWH 9 Sample Tap: LEFT DF IN MAIN HALL Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorin Repeat 1 Cl2 Tota Cl2 Free Cl2 Com	NO COUN ated: No: al: e: pined:	ГҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50385	3113B		4792	07/05/16

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

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AR Sheet No: 0418670-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

MASI Dublin Laboratory:

PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:18 Sample Matrix: POTABLE Sample Monitoring Point: TWH 10 Sample Tap: RIGHT DF IN MAIN HALL Sample Type: Sample Address: 300 W DUBLIN GRANVILLE			Private County: Chlorina Repeat N Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: pined:	ΓY
Test Reguested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50577	3113B		4792	07/05/16

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0418672-AR

Dublin, Ohio 43017

Phone (614) 873-4654

MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

PO No:

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 County: NO COUNTY Sampler Name: MATT GEIGER Sample Date: 06/29/16 Chlorinated: Sample Time: 07:22 Repeat No: Cl2 Total: Sample Matrix: POTABLE Sample Monitoring Point: TWH 12 Cl2 Free: Sample Tap: 2ND DF MAIN ENTRANCE Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _ _ _ _ **_ _ _ _ _** _ _ _ _ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result 50574 3113B LEAD 4792 07/05/16 <5.0 ug/1

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: 0000005911

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LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Sample Time: 07:24 Chlorinated: Repeat No: Cl2 Total: Sample Matrix: POTABLE Sample Monitoring Point: TWH 13 Cl2 Free: Sample Tap: 3RD DF MAIN ENTRANCE Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result 50571 3113B 4792 07/05/16 LEAD <5.0 ug/l

> Public Drinking Water Analysis Results, as Required by OEPA, are Reported Following Final QA/QC



AR Sheet No: 0418673-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

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877

0000005911



Test	Requested	Lab	Method	Analyst	Date
Test	Result	Number	Number	Number	Analyzed
LEAD <5.0	ug/l	50568	3113B	4792	07/05/16

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0418675-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: 877

MASI Dublin Laboratory:

PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:28 Sample Matrix: POTABLE Sample Monitoring Point: TWH 15 Sample Tap: DF GYM 111 Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorina Repeat M Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: pined:	ГҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50566	3113B		4792	07/05/16

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Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: 0000005911

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0418676-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. Sampler Name: MATT GEIGER Sample Date: 06/29/16 Sample Time: 07:30			Private County: Chlorin Repeat	NO COUN ated: No:	TY
Sample Matrix: POTABLE			Cl2 Tot	al:	
Sample Monitoring Point: TWH 16			Cl2 Fre	e:	
Sample Tap: DF GYM 111			Cl2 Com	bined:	
Sample Type:					
Sample Address: 300 W DUBLIN GRANVILLE					
Sample ID:					
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50565	3113B		4792	07/05/16

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

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Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 07:32 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 17 Cl2 Free: Sample Tap: DF GYM 111 Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: ____ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result 51147 3113B 4792 07/05/16 LEAD <5.0 ug/l

Public Drinking Water Analysis Results, as Required by OEPA, are Reported Following Final QA/QC

Client No: 000005911 AR Sheet No: 0418677-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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P.O. Box 1440 Dublin, Ohio 43017 Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: LAWHON & ASSOCIATES, INC. 0000005911 CHUCK WILSON AR Sheet No: 0418678-AR MASI Dublin Laboratory: 877 1441 KING AVENUE MASI Cincinnati Laboratory: 4100 COLUMBUS OH 43212 PWS ID No: STU ID No: PO No: Along with your results listed below we would like to thank you for allowing Account Name: LAWHON & ASSOCIATES, INC. Private Sampler Name: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 07:34 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 18 Cl2 Free: Sample Tap: WEIGHT RM LEFT DF Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 51146 3113B 4792 07/05/16 <5.0 ug/l

> Public Drinking Water Analysis Results, as Required by OEPA, are Reported Following Final QA/QC



Dear Client:

MASI to assist you with your environmental testing requirements.

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

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MASI Dublin Laboratory:

PO No:

Phone (614) 873-4654

AR Sheet No: 0418679-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No:

877

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:36 Sample Matrix: POTABLE Sample Monitoring Point: TWH 19 Sample Tap: WEIGHT RM RIGHT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Number Number	Analyst Date Number Analyzed
LEAD <5.0 ug/l	51145 3113B	4792 07/05/16

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Phone (614) 873-4654

Paqe:

AR Sheet No: 0418680-AR

Date: 07/15/16

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877

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Client No:

PWS ID No:

STU ID No:

PO No:



Account Name: LAWHON & ASSOCIATES, INC. Sampler Name: MATT GEIGER Sample Date: 06/29/16 Sample Time: 07:38 Sample Matrix: POTABLE Sample Monitoring Point: TWH 20 Sample Tap: GIRLS LOCKER RM DF Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Number Number	Analyst Date Number Analyzed
LEAD <5.0 ug/l	51144 3113B	4792 07/05/16

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Dublin, Ohio 43017

Phone (614) 873-4654

AR Sheet No: 0418681-AR

MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100 PWS ID No:

> STU ID No: PO No:

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LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Sample Time: 07:40 Chlorinated: Repeat No: Cl2 Total: Sample Matrix: POTABLE Sample Monitoring Point: TWH 21 Cl2 Free: Sample Tap: BOYS LOCKER RM DF RIGHT Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result · _____ 51143 3113B 4792 07/05/16 LEAD <5.0 ug/l

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0418682-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: 877

MASI Dublin Laboratory:

PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:42 Sample Matrix: POTABLE Sample Monitoring Point: TWH 22 Sample Tap: BOYS LOCKER RM MIDDLE DF Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: Chlorin Repeat Cl2 Tot Cl2 Fre Cl2 Com	NO COUN nated: No: .al: .e: bined:	Τ¥
Test Requested Test Result	Lab Me Number Nu	thod mber	Analyst Number	Date Analyzed
LEAD <5.0 ug/l	51142 31	.13B	4792	07/05/16

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Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0418683-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 Chlorinated: Repeat No:				
Sample Date: 06/29/16					
Sample Time: 07:44					
Sample Matrix: POTABLE			Cl2 Tot	al:	
Sample Monitoring Point: TWH 23			Cl2 Fre	e:	
Sample Tap: BOYS LOCKER RM DF LEFT			Cl2 Com	bined:	
Sample Type:					
Sample Address: 300 W DUBLIN GRANVILLE					
Sample ID:					
Test Requested	Lab	Method		Analyst	Date
Test Result	Number	Number		Number	Analyzed
			- 		
LEAD	51141	3113B		4792	07/05/16
<5.0 ug/l					
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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Dublin, Ohio 43017 •

Phone (614) 873-4654

Client No: 0000005911

AR Sheet No: 0418684-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100 PWS ID No:

> STU ID No: PO No:

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 County: NO COUNTY Sampler Name: MATT GEIGER Sample Date: 06/29/16 Chlorinated: Sample Time: 07:46 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 24 Cl2 Free: Sample Tap: GYM 112 DF Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ 51140 3113B LEAD 4792 07/05/16 <5.0 ug/l

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: Date: 07/15/16

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Client No:

MASI Dublin Laboratory:

PO No:

AR Sheet No: 0418685-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No:

Phone (614) 873-4654

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0000005911

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:48 Sample Matrix: POTABLE Sample Monitoring Point: TWH 25 Sample Tap: DF IN BASEMENT NEAR 019 Sample Type: Sample Address: 300 W DUBLIN GRANVILLE		Prix Cour Chlc Repe Cl2 Cl2 Cl2	vate hty: NO COUN prinated: eat No: Total: Free: Combined:	ГҮ
Test Requested Test Result	Lab Ma Number Na	lethod lumber	Analyst Number	Date Analyzed
LEAD <5.0 ug/l	51139 3:	113B	4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0418686-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No:

877

MASI Dublin Laboratory:

PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:50 Sample Matrix: POTABLE Sample Monitoring Point: TWH 26 Sample Tap: DF BACK HALL NEAR 144 Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Number Number	Analyst Date Number Analyzed
LEAD <5.0 ug/l	50362 3113B	4792 07/05/16

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P.O. Box 1440

Envices

Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

877

AR Sheet No: 0418687-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

MASI Dublin Laboratory:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:52 Sample Matrix: POTABLE Sample Monitoring Point: TWH 27 Sample Tap: DF NEAR RM 178 LEFT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorina Repeat M Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: Jo: al: e: pined:	ГҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	51131	3113B		4792	07/05/16

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Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0418688-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. Sampler Name: MATT GEIGER Sample Date: 06/29/16 Sample Time: 07:54 Sample Matrix: POTABLE Sample Monitoring Point: TWH 28 Sample Tap: DF NEAR RM 178 RIGHT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorina Repeat I Cl2 Tota Cl2 Free Cl2 Comb	NO COUN' ated: No: al: e: pined:	ГҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50358	3113B		4792	07/05/16

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P.O. Box 1440



Dublin, Ohio 43017 Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: Date: 07/15/16

Client No:

MASI Dublin Laboratory:

PO No:

AR Sheet No: 0418689-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No:

1

877

0000005911

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 07:56 Sample Matrix: POTABLE Sample Monitoring Point: TWH 29 Sample Tap: DF NEAR 174 LEFT Sample Type:			Private County: Chlorin Repeat Cl2 Tot Cl2 Fre Cl2 Com	NO COUN ated: No: al: e: bined:	ТҮ
Sample Address: 300 W DUBLIN GRANVILLE Sample ID:					
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50963	3113B		4792	07/05/16

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Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0418690-AR MASI Dublin Laboratory: MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Client No:

Phone (614) 873-4654

0000005911

877

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 COUN	TY
Sample Date: 06/29/16			Chlorina	ated:	
Sample Time: 07:58			Repeat 1	No:	
Sample Matrix: POTABLE			Cl2 Tota	al:	
Sample Monitoring Point: TWH 30			Cl2 Free	е:	
Sample Tap: DF NEAR RM 174 RIGHT			Cl2 Com	bined:	
Sample Type:					
Sample Address: 300 W DUBLIN GRANVILLE					
Sample ID:					
Test Requested	Lab	Method		Analyst	Date
Test Result	Number	Number		Number	Analyzed
LEAD	51134	3113B		4792	07/05/16
<5.0 ug/l					-,,,,,,,,,

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Certificate of Analysis Range Reprint Page: Date: 07/15/16

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Client No:

PWS ID No: STU ID No:

PO No:

AR Sheet No: 0418691-AR

MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100

Phone (614) 873-4654

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Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 County: NO COUNTY Sampler Name: MATT GEIGER Sample Date: 06/29/16 Chlorinated: Sample Time: 08:00 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 31 Cl2 Free: Sample Tap: DF RM 159 Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result Number Number 51138 3113B LEAD 4792 07/05/16 <5.0 ug/l

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P.O. Box 1440

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> Page: 1 Date: 07/15/16

> > 0000005911

Client No:

PWS ID No: STU ID No:

PO No:

AR Sheet No: 0418692-AR

MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 08:02 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 32 Cl2 Free: Sample Tap: CAFETERIA DF LEFT Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ LEAD 50369 3113B 4792 07/05/16 <5.0 ug/l

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Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0418693-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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 COUN	ГҮ
Sample Date: 06/29/16			Chlorina	ated:	
Sample Time: 08:04			Repeat 1	io:	
Sample Matrix: POTABLE			Cl2 Tota	al:	
Sample Monitoring Point: TVH 33			Cl2 Free	e:	
Sample Tap: CAFETERIA DF RIGHT			Cl2 Comb	oined:	
Sample Type:					
Sample Address: 300 W DUBLIN GRANVILLE					
Sample ID:					
Test Requested	Lab	Method		Analyst	Date
Test Result	Number	Number		Number	Analyzed
LEAD	51130	3113B		4792	07/05/16
<pre>< <5.0 ug/l</pre>		• -			,,

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Phone (614) 873-4654 P O. Box 1440 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: 0000005911 LAWHON & ASSOCIATES, INC. AR Sheet No: 0418694-AR CHUCK WILSON MASI Dublin Laboratory: 877 1441 KING AVENUE 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: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 08:06 Repeat No: Cl2 Total: Sample Matrix: POTABLE Cl2 Free: Sample Monitoring Point: TWH 34 Sample Tap: DF NEAR 276 RIGHT Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 50962 3113B 4792 07/05/16 <5.0 uq/1

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Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE Client No: 000005911 AR Sheet No: 0418695-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. Sampler Name: MATT GEIGER Sample Date: 06/29/16 Sample Time: 08:08 Sample Matrix: POTABLE Sample Monitoring Point: TWH 35 Sample Tap: DF NEAR 276 LEFT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorina Repeat I Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: pined:	ТҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	51133	3113B		4792	07/05/16

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P.O. Box 1440	Dublin,Ohio 43017 alysis Range F	• Phone (614) 873 Reprint	3-4654
		Page: Date: (1 07/15/16
LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212	C AR MASI Dub MASI Cin	lient No: (Sheet No: 0418 lin Laboratory: cinnati Laborat PWS ID No:	0000005911 3696-AR 877 Cory: 4100
Dear Client:			
Along with your results listed below we we MASI to assist you with your environmental	ould like to t l testing requ	hank you for al irements.	lowing
Account Name: LAWHON & ASSOCIATES, INC. Sampler Name: MATT GEIGER Sample Date: 06/29/16 Sample Time: 08:10 Sample Matrix: POTABLE Sample Monitoring Point: TWH 36 Sample Tap: DF NEAR 280 RIGHT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COU Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:	NTY
Test Requested Test Result	Lab Method Number Number	Analys Number	t Date Analyzed
LEAD <5.0 ug/l	51135 3113B	4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0418697-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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: 06/29/16 Sample Time: 08:12 Sample Matrix: POTABLE Sample Monitoring Point: TWH 37 Sample Tap: DF NEAR 280 LEFT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE			Private County: Chlorina Repeat I Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: Dined:	ГҮ
Test Requested Test Result	Lab Number	Method Number	-- -	Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50578	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: 0000005911

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0418698-AR MASI Dublin Laboratory: MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

877

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: 06/29/16 Sample Time: 08:14 Sample Matrix: POTABLE Sample Monitoring Point: TWH 38 Sample Tap: DF NEAR 283 RIGHT Sample Type:			Private County: Chlorin Repeat Cl2 Tot Cl2 Tot Cl2 Free Cl2 Com	NO COUN ated: No: al: e: bined:	ГҮ
Sample Address: 300 W DUBLIN GRANVILLE Sample ID:					
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50579	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: Date: 07/15/16

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Client No:

MASI Dublin Laboratory:

AR Sheet No: 0418699-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

> STU ID No: PO No:

Phone (614) 873-4654

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0000005911

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 08:16 Sample Matrix: POTABLE Sample Monitoring Point: TWH 39 Sample Tap: DF NEAR 283 LEFT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Number Number	Analyst Date Number Analyzed
LEAD <5.0 ug/l	51132 3113B	4792 07/05/16

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COLUMBUS OH 43212

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Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE Client No: 000005911 AR Sheet No: 0418700-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: 06/29/16 Chlorinated: Sample Time: 08:18 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 40 Cl2 Free: Sample Tap: DF NEAR 230 LEFT Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Number Number Test Result _____ 51137 3113B 4792 07/05/16 LEAD<5.0 ug/l

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0419991-AR

MASI Dublin Laboratory:

PO No:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

Phone (614) 873-4654

877

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 08:20 Sample Matrix: POTABLE			Private County: Chlorina Repeat M	NO COUN' ated: No:	ΤY
Sample Monitoring Point: TWH 41 Sample Tap: DF NEAR 230 LEFT Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Cl2 Free Cl2 Comb	pined:	
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	51136	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

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Phone (614) 873-4654

AR Sheet No: 0419992-AR MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: MATT GEIGER County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 08:22 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 42 Cl2 Free: Sample Tap: DF HALL NEAR 229 Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _____ -----Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result 4792 07/05/16 LEAD 50387 3113B <5.0 uq/l

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0419993-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

877

MASI Dublin Laboratory:

PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Sample Time: 08:24 Sample Matrix: POTABLE Sample Monitoring Point: TWH 43 Sample Tap: DF NEAR 220 Sample Type: Sample Address: 300 W DUBLIN GRANVILLE			Private County: Chlorina Repeat M Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: pined:	ГҮ
Test Regult	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50590	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0419994-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

> STU ID No: PO No:

877

MASI Dublin Laboratory:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:26 Sample Matrix: POTABLE Sample Monitoring Point: TWH 45 Sample Tap: RM 20 SINK Sample Tap: RM 20 SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Metho Number Numbe	d Analyst Date Number Analyzed
LEAD <5.0 ug/l	50965 3113B	4792 07/05/16

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P.O. Box 1440

A LA HE SUNPOUNDER

Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0419995-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

> STU ID No: PO No:

877

MASI Dublin Laboratory:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:28 Sample Matrix: POTABLE Sample Monitoring Point: TWH 46 Sample Tap: ATHLETIC OFFICE BATH SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorin Repeat Cl2 Tot Cl2 Tot Cl2 Fre Cl2 Com	NO COUN ated: No: al: e: bined:	ΓY
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	49696	3113B		4792	07/05/16

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P.O. Box 1440



Dublin, Ohio 43017 Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: 0000005911 AR Sheet No: 0419996-AR MASI Dublin Laboratory:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

PO No:

877

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:30 Sample Matrix: POTABLE Sample Monitoring Point: TWH 47 Sample Tap: LIBRARY KITCHENETTE SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Privat County Chlori Repeat Cl2 To Cl2 Fr Cl2 Co	e nated: No: tal: ee: mbined:	ГҮ
Test Requested Test Result	Lab Me Number Nu	ethod umber	Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50964 31	113B	4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0419997-AR

Phone (614) 873-4654

877

MASI Dublin Laboratory:

STU ID No: PO No:

MASI Cincinnati Laboratory: 4100 PWS ID No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:32 Sample Matrix: POTABLE Sample Monitoring Point: TWH 48 Sample Tap: KITCHENETTE SINK GENERAL Sample Type: Sample Address: OFFICE 300 W DUBLIN GRANVI	ILLE		Private County: Chlorin Repeat Cl2 Tot Cl2 Fre Cl2 Com	NO COUN nated: No: al: e: bined:	ГҮ
Sample ID: 	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50580	3113B		4792	07/05/16

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P O Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0419998-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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: 06/29/16 Sample Time: 08:34 Sample Matrix: POTABLE Sample Monitoring Point: TWH 49 Sample Tap: KITCH CONCESSION SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE			Private County: Chlorin Repeat Cl2 Tot Cl2 Fre Cl2 Com	NO COUN ated: No: al: e: bined:	ТҮ
Sample ID:			· - - -		
Test Requested Test Result	Lab Number	Method Number	· -	Analyst Number	Date Analyzed
LEAD 33.2 ug/l	50585	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0419999-AR

MASI Dublin Laboratory:

PO No:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

Dublin, Ohio 43017

Phone (614) 873-4654

877

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:36 Sample Matrix: POTABLE Sample Monitoring Point: TWH 50 Sample Tap: RM 156 EAST WALL Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorina Repeat I Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: pined:	ГҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50583	3113B		4792	07/05/16

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Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

P.O. Box 1440

Client No: 0000005911 AR Sheet No: 0420000-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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: 06/29/16 Sample Time: 08:38 Sample Matrix: POTABLE Sample Monitoring Point: TWH 51 Sample Tap: RM 167 SINK S WALL WEST Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorin Repeat Cl2 Tot Cl2 Free Cl2 Com	NO COUN ated: No: al: e: bined:	ГҮ
Test Requested Test Result	Lab Number	Method Number	· • • • • • • • • • • • • • • • • • • •	Analyst Number	Date Analyzed
LEAD 5.1 ug/l	50033	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0420001-AR

MASI Dublin Laboratory:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

877

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:40 Sample Matrix: POTABLE Sample Monitoring Point: TWH 52 Sample Tap: KITCH NE CORNER SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE			Private County: Chlorina Repeat N Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: al: a: pined:	ΓΥ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50034	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Dublin, Ohio 43017 •

Phone (614) 873-4654

AR Sheet No: 0420002-AR

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

> STU ID No: PO No:

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Chlorinated: Sample Time: 08:42 Repeat No: Cl2 Total: Sample Matrix: POTABLE Sample Monitoring Point: TWH 53 Cl2 Free: Sample Tap: RM 168 SINK S WALL WEST Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result · 50036 3113B LEAD 4792 07/05/16 <5.0 ug/l

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0420003-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: 877

MASI Dublin Laboratory:

PO No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:44 Sample Matrix: POTABLE Sample Monitoring Point: TWH 54 Sample Tap: KITCH W WALL N SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Number Number	Analyst Date Number Analyzed
LEAD 9.4 ug/l	50037 3113B	4792 07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

AR Sheet No: 0420004-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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		T11.7
Sample Date: 06/29/16			Chlorin	ated:	ΤŢ
Sample Time: 08:46			Repeat	No:	
Sample Matrix: POTABLE			Cl2 Tot	al:	
Sample Monitoring Point: TWH 65			Cl2 Fre	e:	
Sample Tap: KITCH W WALL MIDDLE SINK			Cl2 Com	bined:	
Sample Type:					
Sample Address: 300 W DUBLIN GRANVILLE Sample ID:					
Test Requested	Lab	Method		Analyst	Date
Test Result	Number	Number		Number	Analyzed
LEAD	50039	3113B		4792	07/05/16
<5.0 ug/l					

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0420005-AR

MASI Dublin Laboratory:

PO No:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

Phone (614) 873-4654

877

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 08:48 Sample Matrix: POTABLE Sample Monitoring Point: TWH 56 Sample Tap: KITCH WEST WALL SPRAYER Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Number Number	Analyst Date Number Analyzed
LEAD 22.1 ug/l	50040 3113B	4792 07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0420006-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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: 06/29/16 Sample Time: 08:50 Sample Matrix: POTABLE Sample Monitoring Point: TWH 57 Sample Tap: KITCH SOUTH WALL SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE			Private County: Chlorin Repeat 1 Cl2 Tot Cl2 Free Cl2 Com	NO COUN ated: No: al: e: bined:	ГҮ
Sample ID: Test Requested	 Lab	Method		Analyst	Date
Test Result	Number	Number	- 	Number	Analyzed
LEAD 11.0 ug/l	50450	3113B		4792	07/05/16

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P.O. Box 1440

Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: LAWHON & ASSOCIATES, INC. 0000005911 AR Sheet No: 0420007-AR MASI Dublin Laboratory: 877

Dublin, Ohio 43017 • Phone (614) 873-4654

COLUMBUS OH 43212

1441 KING AVENUE

CHUCK WILSON

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 Sample Date: 06/29/16 Chlorinated: Sample Time: 08:52 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 58 Cl2 Free: Sample Tap: KITCH SOUTH WALL SPRAYER Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 50452 3113B 4792 07/05/16 27.6 ug/l

> Public Drinking Water Analysis Results, as Required by OEPA, are Reported Following Final QA/QC



Private

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

PO No:

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911

Phone (614) 873-4654

AR Sheet No: 0420008-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

> STU ID No: PO No:

877

MASI Dublin Laboratory:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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.

ount Name: LAWHON & ASSOCIATES, INC.		Private County: NO COUNTY Chlorinated:					
Sampler Name: SHAWEN JENKINS Sample Date: 06/29/16							
						Sample Time: 08:54	
Sample Matrix: POTABLE	Matrix: POTABLE			Cl2 Total:			
Sample Monitoring Point: TWH 59			Cl2 Free:				
Sample Tap: KITCH SOUTHWEST CORNER			C12 Co	mbined:			
Sample Type:							
Sample Address: SINK 300 W DUBLIN GRANVIL	LE						
Sample ID:							
Test Requested	Lab	Method		Analyst	Date		
Test Result	Number	Number		Number	Analyzed		
LEAD	50463	3113B		4792	07/05/16		
10.2 ug/l					, -,		

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Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0420009-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.			Privat	e	
Sampler Name: SHAWEN JENKINS			County	7: NO COUN	TY
Sample Date: 06/29/16			Chlori	inated:	
Sample Time: 08:56			Repeat	: No:	
Sample Matrix: POTABLE			C12 To	stal:	
Sample Monitoring Point: TWH 60			Cl2 Fr	cee:	
Sample Tap: KITCH SERVERY SINK SOUTH			C12 Cc	mbined:	
Sample Type:					
Sample Address: 300 W DUBLIN GRANVILLE					
Sample ID:					
Test Requested	Lab	Method		Analyst	Date
Test Result	Number	Number		Number	Analvzed
LEAD	50469	3113B		4792	07/05/16
<5.0 ug/l					
Page 1 of 70



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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Phone (614) 873-4654

0000005911

877

Client No:

MASI Dublin Laboratory:

PO No:

AR Sheet No: 0420011-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 09:00 Sample Matrix: POTABLE Sample Monitoring Point: TWH 62 Sample Tap: RM 172 S WALL E SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Privat County Chlori Repeat Cl2 To Cl2 Fr Cl2 Co	te nated: No: Dtal: Tee: Dmbined:	ТҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50510	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: Date: 07/15/16

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Client No:

MASI Dublin Laboratory:

PO No:

AR Sheet No: 0420012-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

Phone (614) 873-4654

1

877

0000005911

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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			Private County: NO COUNTY			
Sample Date: 06/29/16 Sample Time: 09:02 Sample Matrix: POTABLE Sample Monitoring Point: TWH 63 Sample Tap: RM 176 N WALL MIDDLE SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Chlorin Repeat Cl2 Tot Cl2 Fre Cl2 Com	ated: No: al: e: bined:		
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed	
LEAD <5.0 ug/l	50525	3113B		4792	07/05/16	

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 INC. Client No: 0000005911 AR Sheet No: 0420013-AR

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MASI Dublin Laboratory:

PO No:

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

Phone (614) 873-4654

877

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 09:04 Sample Matrix: POTABLE Sample Monitoring Point: TWH 64 Sample Tap: RM 177 S WALL Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Number Number	Analyst Date Number Analyzed
LEAD <5.0 ug/l	50538 3113B	4792 07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Phone (614) 873-4654

0000005911

877

Client No:

MASI Dublin Laboratory:

PO No:

AR Sheet No: 0420014-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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	1	
Sampler Name: SHAWEN JENKINS			County:	NO COUN	TY
Sample Date: 06/29/16			Chlorin	ated:	
Sample Time: 09:06			Repeat	No:	
Sample Matrix: POTABLE			Cl2 Tot	al:	
Sample Monitoring Point: TWH 65			Cl2 Fre	e:	
Sample Tap: RM 185 S WALL 2ND FROM			Cl2 Com	bined:	
Sample Type:					
Sample Address: EAST 300 W DUBLIN GRANVIL	\mathbf{LE}				
Sample ID:					
Test Requested	Lab	Method		Analvst	Date
Test Result	Number	Number		Number	Analyzed
		- -			
LEAD	50028	3113B		4792	07/05/16
12.8 ug/l					.,,

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P.O. Box 1440

LAWHON & ASSOCIATES, INC.

Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No:

Phone (614) 873-4654

AR Sheet No: 0420015-AR

MASI Dublin Laboratory: 877

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No:

PO No:

0000005911

CHUCK WILSON 1441 KING AVENUE

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: 06/29/16 Chlorinated: Sample Time: 09:08 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 66 Cl2 Free: Sample Tap: RM 190 WESTERN Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 50029 3113B 4792 07/05/16 <5.0 ug/l

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P.O. Box 1440 Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 LAWHON & ASSOCIATES, INC. Client No: 0000005911 AR Sheet No: 0420016-AR CHUCK WILSON MASI Dublin Laboratory: 877 1441 KING AVENUE MASI Cincinnati Laboratory: 4100 COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: SHAWEN JENKINS County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 09:10 Repeat No: Sample Matrix: POTABLE Cl2 Total: Cl2 Free: Sample Monitoring Point: TWH 67 Sample Tap: MENS BATH NEAR 197 EAST Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _ _ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 50389 3113B 4792 07/05/16

<5.0 ug/l



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P.O. Box 1440 Dublin, Ohio 43017 • Phone (614) 873-4654 Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16 Client No: LAWHON & ASSOCIATES, INC. 0000005911 AR Sheet No: 0420017-AR CHUCK WILSON MASI Dublin Laboratory: 877 1441 KING AVENUE MASI Cincinnati Laboratory: 4100 COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: SHAWEN JENKINS County: NO COUNTY Sample Date: 06/29/16 Chlorinated: Sample Time: 09:12 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH 68 Cl2 Free: Sample Tap: RM 183 TEACHER SINK Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 50411 3113B 4792 07/05/16

12.3 ug/l

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0420018-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Phone (614) 873-4654

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: 06/29/16 Sample Time: 09:14 Sample Matrix: POTABLE Sample Monitoring Point: TWH 69 Sample Tap: RM 172 SINK N WALL EAST Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:			Private County: Chlorina Repeat I Cl2 Tota Cl2 Free Cl2 Comb	NO COUN ated: No: al: e: pined:	ГҮ
Test Requested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50416	3113B		4792	07/05/16

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P.O. Box 1440



Certificate of Analysis Range Reprint Page: 1 Date: 07/15/16

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Client No:

STU ID No:

MASI Dublin Laboratory:

PO No:

AR Sheet No: 0420019-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

Phone (614) 873-4654

0000005911

877

Dublin, Ohio 43017

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 Sample Date: 06/29/16 Sample Time: 09:16 Sample Matrix: POTABLE Sample Monitoring Point: TWH 70 Sample Tap: RR SINK BY 280 EASTERN Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:		Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:	
Test Requested Test Result	Lab Method Number Number	Analyst Number An	Date nalyzed
LEAD <5.0 ug/l	50417 3113B	4792 07	7/05/16

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Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

0000005911

877

Client No:

MASI Dublin Laboratory:

PO No:

AR Sheet No: 0420020-AR

MASI Cincinnati Laboratory: 4100 PWS ID No:

STU ID No:

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 COUN	ΤY
Sample Date: 06/29/16			Chlorina	ated:	
Sample Time: 09:18			Repeat 1	JO:	
Sample Matrix: POTABLE			Cl2 Tota	al:	
Sample Monitoring Point: TWH 71			Cl2 Free	≥:	
Sample Tap: RM 250 SINK			Cl2 Comb	pined:	
Sample Type:					
Sample Address: 300 W DUBLIN GRANVILLE					
Sample ID:					
Test Requested	Lab	Method		Analvst	Date
Test Result	Number	Number		Number	Analyzed
LEAD	50419	3113B		4792	07/05/16
8.0 ug/l					- , ,

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P.O. Box 1440	Dublin, Ohio 43017 • Phone (614) 873-4654
Certificate of A	Analysis Range Reprint Page: 1 Date: 07/15/16
LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212	Client No: 0000005911 AR Sheet No: 0420021-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No:
Dear Client:	STU ID No: PO No:
Along with your results listed below we MASI to assist you with your environment	would like to thank you for allowing al testing requirements.
Account Name: LAWHON & ASSOCIATES, INC. Sampler Name: SHAWEN JENKINS Sample Date: 06/29/16 Sample Time: 09:20 Sample Matrix: POTABLE Sample Monitoring Point: TWH 72 Sample Tap: RM 248 HOME EC S WALL Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:	Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Analyst Date Number Number Number Analyzed
LEAD	50420 3113B 4792 07/05/16

LEAD <5.0 ug/l

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

Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

0000005911

877

Client No:

MASI Dublin Laboratory:

AR Sheet No: 0420022-AR

MASI Cincinnati Laboratory: 4100

PWS ID No: STU ID No: PO No:

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

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 COUN	ΓY
Sample Date: 06/29/16			Chlorin	ated:	
Sample Time: 09:22			Repeat 1	No:	
Sample Matrix: POTABLE			Cl2 Tota	al:	
Sample Monitoring Point: TWH 73			Cl2 Free	e:	
Sample Tap: RM 248 HOME EC W WALL			Cl2 Com	bined:	
Sample Type:					
Sample Address: N SINK 300 W DUBLIN GRANV	ILLE				
Sample ID:					
Test Requested	Lab	Method		Analyst	Date
Test Result	Number	Number		Number	Analyzed
LEAD	50424	3113B		4792	07/05/16
15.4 ug/l					- / /

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P.O. Box 1440	Dublin, Ohio 43017 • Phone (614) 873-4654
Certificate of Ar	alysis Range Reprint Page: 1 Date: 07/15/16
LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE	Client No: 0000005911 AR Sheet No: 0420023-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100
COLUMBUS OH 43212 Dear Client:	PWS ID No: STU ID No: PO No:
Along with your results listed below we w MASI to assist you with your environmenta	ould like to thank you for allowing I testing requirements.
Account Name: LAWHON & ASSOCIATES, INC. Sampler Name: SHAWEN JENKINS Sample Date: 06/29/16 Sample Time: 09:24 Sample Matrix: POTABLE Sample Monitoring Point: TWH 74 Sample Tap: RM 241 SINK Sample Type: Sample Address: 300 W DUBLIN GRANVILLE Sample ID:	Private County: NO COUNTY Chlorinated: Repeat No: Cl2 Total: Cl2 Free: Cl2 Combined:
Test Requested Test Result	Lab Method Analyst Date Number Number Number Analyzed
LEAD <5.0 ug/l	50425 3113B 4792 07/05/16

Public Drinking Water Analysis Results, as Required by OEPA, are Reported Following Final QA/QC

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Certificate of Analysis Range Reprint

Page: 1 Date: 07/15/16

LAWHON & ASSOCIATES, INC. CHUCK WILSON 1441 KING AVENUE

COLUMBUS OH 43212

Client No: 000005911 AR Sheet No: 0420024-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. Sampler Name: SHAWEN JENKINS Sample Date: 06/29/16 Sample Time: 09:26 Sample Matrix: POTABLE Sample Monitoring Point: TWH 75 Sample Tap: CUSTODIAL SINK NEAR 230 Sample Type: Sample Address: 300 W DUBLIN GRANVILLE RD			Private County: Chlorin Repeat Cl2 Tot Cl2 Fre Cl2 Con	e NO COUN nated: No: cal: ee: bined:	ТҮ
Test Reguested Test Result	Lab Number	Method Number		Analyst Number	Date Analyzed
LEAD <5.0 ug/l	50426	3113B		4792	07/05/16

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Client No: 0000005911 AR Sheet No: 0420025-AR MASI Dublin Laboratory: 877 MASI Cincinnati Laboratory: 4100 PWS ID No: STU ID No: PO No:

Page:

Date: 07/15/16

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Account Name: LAWHON & ASSOCIATES, INC. Private Sampler Name: SHAWEN JENKINS County: NO COUNTY Chlorinated: Sample Date: 06/29/16 Sample Time: 09:28 Repeat No: Sample Matrix: POTABLE Cl2 Total: Cl2 Free: Sample Monitoring Point: TWH 76 Sample Tap: MENS BATH NEAR 219 Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE RD Sample ID: -Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result LEAD 50441 3113B 4792 07/05/16 5.7 ug/l

Certificate of Analysis - Fax Copy MASI ENVIRONMENTAL SERVICES P.O. Box 1440 Dublin, Ohio 43017 (614) 873-4654 Page: 1 Date: 07/28/16 LAWHON & ASSOCIATES, INC. Client No: 0000005911 AR Sheet No: 0409414-m. MASI Dublin Laboratory: 877 CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: SHAWEN JENKINS County: FRANKLIN Sample Date: 07/22/16 Chlorinated: Sample Time: 07:30 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: TWH77 C12 Free: Sample Tap: KITCHEN CONCESSION SINK Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE RD Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ _____ LEAD 64752 3113B 4792 07/26/16 7.5 ug/l

Certificate of Analysis - Fax Copy MASI ENVIRONMENTAL SERVICES P.O. Box 1440 Dublin, Ohio 43017 (614) 873-4654 Page: 1 Date: 07/28/16 LAWHON & ASSOCIATES, INC. Client No: 0000005911 AR Sheet No: 0409415-m. MASI Dublin Laboratory: 877 CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: SHAWEN JENKINS County: FRANKLIN Sample Date: 07/22/16 Chlorinated: Sample Time: 07:32 Repeat No: Sample Matrix: POTABLE C12 Total: Sample Monitoring Point: TWH78 C12 Free: Sample Tap: KITCH WEST WALL SPRAYER Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE RD Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ _____ LEAD 64751 3113B 4792 07/26/16 <5.0 ug/l

Certificate of Analysis - Fax Copy MASI ENVIRONMENTAL SERVICES P.O. Box 1440 Dublin, Ohio 43017 (614) 873-4654 Page: 1 Date: 07/28/16 LAWHON & ASSOCIATES, INC. Client No: 0000005911 AR Sheet No: 0409410-m. MASI Dublin Laboratory: 877 CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: SHAWEN JENKINS County: FRANKLIN Sample Date: 07/22/16 Chlorinated: Sample Time: 07:34 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH79 C12 Free: Sample Tap: KITCH SOUTH WALL SPRAYER Cl2 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE RD Sample ID: _____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ _____ LEAD 64750 3113B 4792 07/26/16 <5.0 ug/l

Certificate of Analysis - Fax Copy MASI ENVIRONMENTAL SERVICES P.O. Box 1440 Dublin, Ohio 43017 (614) 873-4654 Page: 1 Date: 07/28/16 LAWHON & ASSOCIATES, INC. Client No: 0000005911 AR Sheet No: 0409417-AR MASI Dublin Laboratory: 877 CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: SHAWEN JENKINS County: FRANKLIN Sample Date: 07/22/16 Chlorinated: Sample Time: 07:36 Repeat No: Sample Matrix: POTABLE Cl2 Total: C12 Free: Sample Monitoring Point: TWH80 Sample Tap: HOME EC RM 248 WEST WALL Cl2 Combined: Sample Type: Sample Address: NORTH SINK 300 W DUBLIN GRANVILLE RD Sample ID: ____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ _____ LEAD 64749 3113B 4792 07/26/16 <5.0 ug/l

Certificate of Analysis - Fax Copy MASI ENVIRONMENTAL SERVICES P.O. Box 1440 Dublin, Ohio 43017 (614) 873-4654 Page: 1 Date: 07/28/16 LAWHON & ASSOCIATES, INC. Client No: 0000005911 AR Sheet No: 0418662-m. MASI Dublin Laboratory: 877 CHUCK WILSON 1441 KING AVENUE COLUMBUS OH 43212 PWS ID No: STU ID No: Dear Client: 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. Private Sampler Name: SHAWEN JENKINS County: FRANKLIN Sample Date: 06/29/16 Chlorinated: Sample Time: 07:02 Repeat No: Sample Matrix: POTABLE Cl2 Total: Sample Monitoring Point: TWH2 C12 Free: Sample Tap: RM 019 SINK C12 Combined: Sample Type: Sample Address: 300 W DUBLIN GRANVILLE RD Sample ID: ____ Lab Method Analyst Date Number Number Number Analyzed Test Requested Test Result _____ _____ LEAD 64753 3113B 4792 07/26/16 <5.0 ug/l