



CERTIFICATE OF ANALYSIS

Chain of Custody: 663344	Job Name: Naomi Brooks Assistant Principal's Dust Wipes	Date Submitted: 11/04/2024
Client: ECS Mid-Atlantic, LLC	Job Location: Not Provided	Date Analyzed: 11/05/2024
Address: 14026 Thunderbolt Place Suite 100 Chantilly Virginia 20151	Job Number: 47:11652-H8:84	Report Date: 11/05/2024
Attention: Lauren Kesslak	P.O. Number: Not Provided	Date Sampled: 11/04/2024
		Person Submitting: William Sargent

Summary of Atomic Absorption Analysis for Lead

AMA Sample Number	Client Sample Number	Analysis Type	Sample Type	Area Wiped (ft ²)	Reporting Limit	Total ug	Final Result	Comments
663344-1	01 ASST PRINCIPALS OFFICE FL	Flame AA	Wipe	2.0	5.0 ug/sqft	<10.0	<5.0 ug/sqft	
663344-2	02 ASST PRINCIPAL'S OFFICE SILL	Flame AA	Wipe	1.0	10. ug/sqft	<10.0	<10. ug/sqft	
663344-3	03 FB	Flame AA	Wipe	0.0	10. ug	<10.0	<10. ug	

Preparation Method: ASTM E1979-17
 Analysis Method For Flame AA: EPA SW-846 7000B
 N/A = Not Applicable; mg/Kg = parts per million (ppm) on a dry weight basis; mg/L = parts per million (ppm);
 %Pb = percent lead on a dry weight basis; ug = micrograms; ug/L = parts per billion (ppb)
 Note: All samples were received in good condition unless otherwise noted.
 Note: All results have two significant digits. Any additional digits shown should not be considered when interpreting the result.

See QC Summary for analytical results of quality control samples associated with these samples.

Air and Wipe results are not corrected for any blank results. Final results for air and wipe samples are based on client supplied information not verified by this laboratory.

All results are to be considered preliminary and subject to change unless signed by the Technical Director or Deputy.

Analyst(s): Suphin Chinnapad

Technical Director George Land

This report applies only to the sample, or samples, investigated and is not necessarily indicative of the quality or condition of apparently identical or similar products. As a mutual protection to clients, the public, and these Laboratories, this report is submitted and accepted for the exclusive use of the client to whom it is addressed and upon the condition that it is not to be used, in whole or in part, in any advertising or publicity matter without prior written authorization from us. Sample types, locations, and collection protocols are based upon the information provided by the persons submitting them and, unless collected by personnel of these Laboratories, we expressly disclaim any knowledge and liability for the accuracy and completeness

of this information. The results apply only to the sample(s) tested as received. Residual sample material will be discarded in accordance with the appropriate regulatory guidelines, unless otherwise requested by the client. This report must not be used to claim, and does not imply product certification, approval, or endorsement by NY ELAP, AIHA-LAP, or any agency of the Federal Government. All rights reserved. AMA Analytical Services, Inc.



QC Summary for SDG #81697

Overview

Analysis Type: Flame AA
Sample Type: Lead Wipe
Analysis Date: 11/05/2024

Samples Included

663344-1, 663344-2, 663344-3

Preparation Blank

Result: 0.047 ppm

Report Limit Verification Sample

Percent Recovery: 116.6 %

Duplicates

RPD: N/A

Matrix Spike Analysis

Spiked Sample Percent Recovery: N/A
Spike Duplicate Percent Recovery: N/A
RPD: N/A

Matrix Blank

Result: 0.033 ppm

Lab Control Sample #1

Percent Recovery: 272.81 %

Lab Control Sample #2

Percent Recovery: 92.76 %

Reference Sample

Percent Recovery: N/A

Calibration Curve

Correlation: 0.99973

Serial Dilution / Bench Spike

Serial Dilution RPD: N/A
Bench Spike Percent Recovery: N/A

Notes

Recovery for Laboratory Control Sample #1 (LCS1) is 272.81%, above the upper control limit of 120%, indicating a possible high bias for results for this sample delivery group (SDG). Results for LCS2 and all other QC analyses associated with this sample group are within control limits. It is believed the probable cause of this outlier is a problem with the reference dust used to prepare this sample.

663344

LEAD CHAIN OF CUSTODY

Mailing/Billing Information:

Client Name: ECS Mid-Atlantic LLC
 Address: _____
 Address: _____
 Invoice Submittal Email: _____
 Phone #: _____ Fax #: _____

Submittal Information:

Job Name: Naomi Brooks Asst. Principals Dust Wipes
 Job Location: _____
 Job #: 47:11652-H8:84 P.O. #: _____
 Point of Contact: Lauren Kessler Cell #: _____
 Collected by: William Sargent Cell #: _____

Reporting Info (Results provided as soon as technically feasible). If no TAT/Reporting Info is provided, AMA will assign defaults of 5-Day & email/fax to contacts of file.

TURN AROUND TIME (TAT):		REPORT TO:
After Hours (must be pre-scheduled) <input type="checkbox"/> 4-Hours Date Due: _____ <input type="checkbox"/> Immediate Time: _____ <input type="checkbox"/> 24-Hours Comments: _____	Normal Business Hours <input type="checkbox"/> 4-Hour <input type="checkbox"/> 2-Day <input type="checkbox"/> 5 Day + <input checked="" type="checkbox"/> Immd. (6-12hr) <input type="checkbox"/> 3-Day <input type="checkbox"/> Results by Noon <input type="checkbox"/> 1-Day Due Date: <u>11/5/24</u> (may incur addtl fees)	<input checked="" type="checkbox"/> Email: <u>lks@slak@ecslimited.com</u> <input type="checkbox"/> Email CC 1: _____ <input type="checkbox"/> Email CC 2: _____ <input type="checkbox"/> Email CC 3: _____

Sample Type

by submitting samples to AMA, you certify that wipes used meet ASTM E1972 Requirement

Dust Wipe^* 3 (QTY) Air* _____ (QTY) Soil/Solid _____ (QTY) Paint Chip _____ (QTY) % Pb Weight mg/cm²

TCLP _____ (QTY) Drinking Water _____ (QTY) Waste Water _____ (QTY) Furnace (Media type _____) _____ (QTY)

*it is recommended that blank samples be submitted with all air and surface matrix

All samples received in good condition unless otherwise noted.

Sample Information (if field data sheets are included, there is no need to complete this section)						Sample Matrix				COMMENTS/SPECIAL INSTRUCTIONS
Sample Number	Sample Collection Location/Surface	Date (M/D/YYYY)	Time (HH:MM)	Wipe Area (in ²)	Volume (L)	Dust Wipe	Paint Chip/Soil	Air	Water/Other	
01	Asst. Principals office/Floor	11/4/2024	11:54	12 X 24		X				
02	Asst. Principals office/Sill	↓	11:58	4 X 36		X				
03	Field blank			X		X				
				X						
				X						
				X						
				X						
				X						
				X						
				X						
				X						
				X						
				X						

Relinquished by:	<u>William Sargent</u>	Sign Name:	<u>WILLIAMS</u>	Date (m/d/yyyy):	<u>11/4/2024</u>	Time (hh:mm):	<u>4:23 PM</u>	Shipping Information <input type="checkbox"/> UPS <input checked="" type="checkbox"/> In-Person <input type="checkbox"/> Other <input type="checkbox"/> FedEx <input type="checkbox"/> Drop Box <input type="checkbox"/> USPS <input type="checkbox"/> Courier Airbill/Tracking No.: _____
Received by:	<u>LS</u>		<u>Z</u>		<u>11-4-24</u>		<u>1625</u>	