

# Third-Party Lead Clearance Testing Report

**Performed On:** August 19 & 20, 2025, 12:52 PM  
and August 26, 2025, 10:50 AM

**Site:**

Hayes Bilingual School (050)  
971 West Windlake Avenue  
Milwaukee, WI 53204

**Owner:**

Milwaukee Public Schools



**Lead Safe Renovator:**

JCP Construction LLC – DHS LSR Certification #:2540270  
1849 N MLK Drive, Suite 200  
Milwaukee, WI 53212

LSR Supervisor: Dan Husley – DHS LRA Certification #:Information Pending

**Clearance Testing Performed By:**

Devin Gareis, DHS LRA Certification #: LRA-297222

**The Sigma Group, Inc.**

1300 West Canal Street  
Milwaukee, WI 53233  
Ph. 414-643-4200

DHS Lead Company Certification #: 17570

## TABLE OF CONTENTS

---

|                                                           |   |
|-----------------------------------------------------------|---|
| LEAD PAINT STABILIZATION / RENOVATION SCOPE OF WORK ..... | 1 |
| VISUAL INSPECTION OF THE INTERIOR .....                   | 1 |
| VISUAL INSPECTION OF THE EXTERIOR .....                   | 1 |
| LEAD CLEARANCE TESTING SCOPE OF WORK .....                | 1 |
| SUMMARY OF RESULTS .....                                  | 2 |
| QUALIFICATIONS OF REPORT .....                            | 2 |
| MONITORING / MAINTENANCE .....                            | 3 |
| DISCLOSURE REQUIREMENT .....                              | 3 |
| CERTIFICATION STATEMENT .....                             | 3 |

---

## APPENDIX

APPENDIX A – Lead Dust Wipe Sample Results

APPENDIX B – Laboratory Analytical Results

APPENDIX C – Floor Plans with Each Sample Location Marked

APPENDIX D – Inspectors' Certificates

## **LEAD PAINT STABILIZATION / RENOVATION SCOPE OF WORK**

As communicated by Milwaukee Public Schools (MPS), interim control/renovation work performed by the lead safe renovation (LSR) contractor was completed in August 2025. The renovation work generally addressed the following:

### **Paint Hazards**

- Windows – Interim controls applied to deteriorated interior casings and sills
- Walls – Interim controls applied to deteriorated walls.

### **Dust Hazards**

- Windows – Interior sills cleaned throughout the dwelling.
- Floors – Interior floors cleaned throughout the dwelling.

## **VISUAL INSPECTION OF THE INTERIOR**

Prior to clearance sample collection visual inspections were conducted throughout occupied areas including but not limited to classrooms, offices, bathrooms, storage rooms, hallways, and other interior school areas during both the initial and resampling events on August 19 and August 26, 2025, respectively.

Peeling, cracked and/or chipped paint was identified on the ceiling of Rooms 208, 206B and 217, and below the radiator within Room 218; however, it was understood by Sigma that the peeling paint was not lead based paint. No visible dust, debris, or paint chips were observed on floors or other horizontal surfaces within or adjacent to the other work areas. Painted surfaces not previously tested and confirmed to be lead-free were in good condition at the time of these clearance examinations.

## **VISUAL INSPECTION OF THE EXTERIOR**

No exterior visual inspection nor testing was completed.

## **LEAD CLEARANCE TESTING SCOPE OF WORK**

The third-party dust-wipe clearance protocol was performed at select MPS schools where renovation and repair work were completed in Summer 2025. Sigma personnel were instructed, as relayed verbally by the Milwaukee Health Department (MHD) in a meeting on Tuesday August 12, 2025, to follow the following specified protocol for dust wipe clearance sampling that was developed by MHD and MPS personnel.

### **Initial Clearance Testing**

Dust-wipe samples were collected in accordance with Wis. Adm. Code § DHS 163.14(5)(c) and the specifications outlined by MPS and MHD, following Appendix 13.1, *Wipe Sampling of Settled Dust for Lead Determination*, found in the U.S. Department of Housing and Urban Development (HUD) *Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing*, using disposable template guides, pre-moistened wipes, gloves, and documented sample handling and chain-of-custody procedures.

Specifically, dust wipe clearance sampling was completed in:

- At least four classrooms on each building level
- Kindergarten classrooms with additional focus on special needs rooms and spatially across the building level (kindergarten and special needs rooms were identified in the field based on discussions with the school Engineer and on the size and type of furniture/equipment observed).
- A girls' and boys' bathroom on each floor
- Corridors with sample locations focused on corridor intersections, ends and, lower stairwell landings.

The field collection of settled dust samples using wipe sampling methods is used to determine the presence of lead dust hazards on floors, windowsills, and window troughs in a child-occupied structure. The laboratory results were interpreted according to Wis. Adm. Code § DHS 163.14(5)(c)8 to meet the following clearance standards: less than (<) 10 micrograms per square foot ( $\mu\text{g}/\text{ft}^2$ ) on floors, < 100  $\mu\text{g}/\text{ft}^2$  on windowsills, < 100  $\mu\text{g}/\text{ft}^2$  in window troughs, and < 40  $\mu\text{g}/\text{ft}^2$  on exterior porches.

Lead wipe samples were analyzed by:

BATTA Laboratories, LLC  
Delaware Industrial Park  
6 Garfield Way, Newark, DE 19713  
(302) 737-3376  
Accreditation ID: LAP-100448

#### **Follow-up Clearance Testing – Following Failure of a Clearance Limit on a Building Surfaces**

Additional directions for dust-wipe clearance re-sampling, were provided on August 20, 2025, by MPS in consultation with MHD and included the following:

- The building surfaces (floor or sill) that failed.
- The same building surfaces in three adjacent or nearby rooms to obtain a total of four samples.

#### **SUMMARY OF RESULTS**

The initial sampling event was conducted on August 19 and 20, 2025 and included 63 dust-wipe samples collected throughout select classrooms, offices, bathrooms, storage rooms, hallways, and other interior school areas per DHS 163 and the specified MPS and MHD protocol. Laboratory analysis of dust-wipe samples identified lead dust hazards on the floor of Corridor 1-1 Center, with a lead dust concentration exceeding the 10  $\mu\text{g}/\text{ft}^2$  clearance standard. Because this locations failed, the Owner notified the contractor to re-clean the failed building surfaces as well as the same surfaces in untested adjacent rooms.

After recleaning, as notified by MPS, resampling was conducted on August 26, 2025, to retest the previously failed location and collect additional samples from nearby or adjacent rooms. The resampling event included the collection four dust wipe samples in the previously failed Corridor 1-1 Center location and three additional floors in adjacent or surrounding rooms (including Corridor 1-1 Southwest, Room 103 and Room 112). The laboratory results indicate each retest sample location passed clearance, and therefore the areas subject to this clearance examination have passed in accordance with DHS 163.14(5)(c).

The attached **Appendix A** provides a summary of the sample locations, surface types, laboratory detected lead concentrations, regulatory clearance levels, and pass/fail results. Notes regarding units, sampling notation, and applicable DHS 163 regulatory clearance levels are also included. The laboratory results are provided in **Appendix B**. The school floor plan showing sample locations is included in **Appendix C**, and the inspector's certification is provided in **Appendix D**.

#### **QUALIFICATIONS OF REPORT**

The findings presented herein are based on information obtained during the initial August 19 and 20, 2025, sampling event and the August 26, 2025, resampling event. This clearance examination was conducted to determine whether lead dust was present on the floors and/or window sills within the areas subject to clearance testing in this child-occupied facility.

Floors and window sills not specifically mentioned in this report were not evaluated. Specifically, Sigma was instructed to not collect dust-wipe samples from:

- Window sills higher than a 6-year old child could reach.
- Stairwells, faculty rooms and bathrooms, and offices.
- Mechanical, electrical, boiler, and storage rooms, data closets, attics, and/or plumbing chases.
- Window troughs.
- Radiators.
- The exterior (including building components and soil).

The results are limited to the areas and components sampled and do not constitute a determination that the entire property is lead-free or that future conditions will remain free of lead dust hazards.

### **MONITORING / MAINTENANCE**

New hazards may arise from renovation, deterioration, or other activities; ongoing monitoring and maintenance are recommended. Regular ongoing monitoring and visual inspection of the property should be conducted to identify any areas of new deterioration. This may be done by the building owner or a certified risk assessor or hazard investigator. Close attention should be given to areas that received interim control measures, enclosure or encapsulation. New lead hazards may develop over time. Document any new deterioration, rot, and substrate or component failure. These conditions should be corrected promptly using approved lead-safe work practices as part of an ongoing property maintenance program.

### **DISCLOSURE REQUIREMENT**

A copy of this summary must be provided to new lessees (tenants) and purchasers of this property under Federal Law Section 1018 of Title X before they become obligated under a lease or sales contract. The complete report must also be provided to new purchasers and be made available to new tenants. Landlords (lessors) and sellers are also required to distribute an educational pamphlet and include standard warning language in their leases or sales contracts to ensure that parents have the information they need to protect their children from lead-based paint hazards.

### **CERTIFICATION STATEMENT**

I certify that this clearance examination was conducted following the dust-wipe sampling methodology outlined in Appendix 13.1 of the U.S. Department of Housing and Urban Development (HUD) *Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing* and the specifications provided by MPS and MHD. Based on visual inspection and laboratory analysis of dust-wipe samples, the areas subject to this clearance examination have passed in accordance with the clearance values and interpretation criteria specified in Wis. Adm. Code § DHS 163.14(5)(c)8.

Clearance Investigator: Devin Gareis

Signature: 

Date: September 5, 2025

## **APPENDIX A**

---

### **Lead Dust Wipe Sample Results**

**LEAD INVESTIGATION DUST WIPE SAMPLE RESULTS**  
**MILWAUKEE PUBLIC SCHOOLS**

**Lead Renovation**

**Contractor:** JCP Construction LLC

**Site:** 214 - Hayes Bilingual School

**Site Address:** 971 West Windlake Avenue, Milwaukee, WI

**Inspection Type:** Clearance - Lead Dust Wipe

**Sigma Project #:** 24270

**Sample Date:** 8/19/25

**Risk Assessors:** Devin Gareis & Yilda Torres

**Resample Date:** 8/26/25

**Risk Assessor:** Devin Gareis

| Sample No.   | Description             | Surface Type |             | Wipe Sample Detected Lead Concentration (ug/ft <sup>2</sup> ) |            |           |            | DHS<br>Regulatory<br>Clearance<br>Level<br>(ug/ft <sup>2</sup> ) <sup>a,b,c</sup> |
|--------------|-------------------------|--------------|-------------|---------------------------------------------------------------|------------|-----------|------------|-----------------------------------------------------------------------------------|
|              |                         | Floor        | Window Sill | 8/19/2025                                                     | Pass/ Fail | 8/26/2025 | Pass/ Fail |                                                                                   |
| Corr 3-1 SW  | Corridor 3-1 Southwest  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 3-1 NE  | Corridor 3-1 Northeast  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 301 S        | Room 301 Sill           |              | X           | 7.2                                                           | Pass       | ---       | ---        | 100                                                                               |
| 301 F        | Room 301 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 313 S        | Room 313 Sill           |              | X           | <5                                                            | Pass       | ---       | ---        | 100                                                                               |
| 313 F        | Room 313 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 304 S        | Room 304 Sill           |              | X           | 49                                                            | Pass       | ---       | ---        | 100                                                                               |
| 304 F        | Room 304 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 310 S        | Room 310 Sill           |              | X           | <5                                                            | Pass       | ---       | ---        | 100                                                                               |
| 310 F        | Room 310 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 202 F        | Room 202 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 202 S        | Room 202 Sill           |              | X           | 6.1                                                           | Pass       | ---       | ---        | 100                                                                               |
| 213 F        | Room 213 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 213 S        | Room 213 Sill           |              | X           | 23                                                            | Pass       | ---       | ---        | 100                                                                               |
| 211 S        | Room 211 Sill           |              | X           | 28                                                            | Pass       | ---       | ---        | 100                                                                               |
| 211 F        | Room 211 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 205 S        | Room 205 Sill           |              | X           | 43                                                            | Pass       | ---       | ---        | 100                                                                               |
| 205 F        | Room 205 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 216 S        | Room 216 Sill           |              | X           | <5                                                            | Pass       | ---       | ---        | 100                                                                               |
| 216 F        | Room 216 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 2-2A C  | Corridor 2-2A Center    | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 2-2A SW | Corridor 2-2A Southwest | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 208 S        | Room 208 Sill           |              | X           | 11                                                            | Pass       | ---       | ---        | 100                                                                               |
| 208 F        | Room 208 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 2-1 E   | Corridor 2-1 East       | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 2-1 N   | Corridor 2-1 North      | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 104 S        | Room 104 Sill           |              | X           | 7.3                                                           | Pass       | ---       | ---        | 100                                                                               |
| 104 F        | Room 104 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 111 F        | Room 111 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 1-1 C   | Corridor 1-1 Center     | X            |             | 150                                                           | Fail       | <5        | Pass       | 10                                                                                |
| Corr 1-2 NS  | Corridor 1-2 Northwest  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 1-3 NE  | Corridor 1-3 Northeast  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 1-5 C   | Corridor 1-5 Center     | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 1-1 NE  | Corridor 1-1 Northeast  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 131 F        | Room 131 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 101 F        | Room 101 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 101 S        | Room 101 Sill           |              | X           | 47                                                            | Pass       | ---       | ---        | 100                                                                               |
| Corr 1-3 NW  | Corridor 1-3 Northwest  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 1-6 SW  | Corridor 1-6 Southwest  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr 1-1 SW  | Corridor 1-1 Southwest  | X            |             | <5                                                            | Pass       | <5        | Pass       | 10                                                                                |
| Corr 1-5 SE  | Corridor 1-5 Southeast  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 132 F        | Room 132 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 109 F        | Room 109 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |

**LEAD INVESTIGATION DUST WIPE SAMPLE RESULTS  
MILWAUKEE PUBLIC SCHOOLS**

**Lead Renovation**

**Contractor:** JCP Construction LLC  
**Site:** 214 - Hayes Bilingual School  
**Site Address:** 971 West Windlake Avenue, Milwaukee, WI

**Sigma Project #:** 24270

**Sample Date:** 8/19/25

**Risk Assessors:** Devin Gareis & Yilda Torres

**Resample Date:** 8/26/25

**Risk Assessor:** Devin Gareis

**Inspection Type:** Clearance - Lead Dust Wipe

| Sample No.   | Description             | Surface Type |             | Wipe Sample Detected Lead Concentration (ug/ft <sup>2</sup> ) |            |           |            | DHS<br>Regulatory<br>Clearance<br>Level<br>(ug/ft <sup>2</sup> ) <sup>a,b,c</sup> |
|--------------|-------------------------|--------------|-------------|---------------------------------------------------------------|------------|-----------|------------|-----------------------------------------------------------------------------------|
|              |                         | Floor        | Window Sill | 8/19/2025                                                     | Pass/ Fail | 8/26/2025 | Pass/ Fail |                                                                                   |
| Corr G-1A NW | Corridor G-1A Northwest | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr G-1 SW  | Corridor G-1 Southwest  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr G-1B NW | Corridor G-1B Northwest | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr G-1 NE  | Corridor G-1 Northeast  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 005 F        | Room 005 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 003 F        | Room 003 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 011 S        | Room 011 Sill           |              | X           | 3.2                                                           | Pass       | ---       | ---        | 100                                                                               |
| 011 F        | Room 011 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 012 F        | Room 012 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 012 S        | Room 012 Sill           |              | X           | <2                                                            | Pass       | ---       | ---        | 100                                                                               |
| 014 F        | Room 014 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 014 S        | Room 014 Sill           |              | X           | <2                                                            | Pass       | ---       | ---        | 100                                                                               |
| 016 F        | Room 016 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 016 S        | Room 016 Sill           |              | X           | 3.3                                                           | Pass       | ---       | ---        | 100                                                                               |
| 017 S        | Room 017 Sill           |              | X           | 19                                                            | Pass       | ---       | ---        | 100                                                                               |
| 017 F        | Room 017 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr G-2 SE  | Corridor G-2 Southeast  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr G-2 NW  | Corridor G-2 Northwest  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 018 F        | Room 018 Floor          | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| Corr G-3 SE  | Corridor G-3 Southeast  | X            |             | <5                                                            | Pass       | ---       | ---        | 10                                                                                |
| 103 F        | Room 103 Floor          | X            |             | ---                                                           | ---        | <5        | Pass       | 10                                                                                |
| 112 F        | Room 112 Floor          | X            |             | ---                                                           | ---        | <5        | Pass       | 10                                                                                |

**Notes:**

ft<sup>2</sup> = square feet; ug/ft<sup>2</sup> = micrograms per square foot

-- = no sample collected

DHS 163 - Wisconsin Department of Health Services Ch. 163 Certification for the Identification, removal, and reduction of lead-based paint hazards

a. DHS 163 Regulatory Clearance Levels DHS 163.14(5)(c)8.a. = 10 µg/ft<sup>2</sup> on an interior floor.

b. DHS 163 Regulatory Clearance Levels DHS 163.14(5)(c)8.b. = 100 µg/ft<sup>2</sup> on an interior windowsill.

c. DHS 163 Regulatory Clearance Levels DHS 163.14(5)(c)8.c. = 100 µg/ft<sup>2</sup> on window wells or troughs.

## **APPENDIX B**

---

### **Laboratory Analytical Results**



RP25082119

Dedicated to a Cleaner  
Environment Since 1982



NY ELAP# 11993  
PCM, PLM, TEM & LEAD

**batta**  
LABORATORIES

BATTA LABORATORIES, LLC  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302)737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PA

Web: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)



**NVLAP**  
Lab Code: 101032-D

## REPORT OF ANALYSIS

Report#: RP25082119

Project Number: 250821007

Project Name: The Sigma Group, Inc.

Project Location: 971 W. Windlake Ave. Milwaukee, WI 53204

Analyte Requested: Lead

Method Test Method: NIOSH 9100 / NIOSH 7082

Matrix: Wipe

Date Sampled: 08/19/2025

Sampled By: Client

Date Received: 08/21/2025

Date Analyzed: 08/21/2025

Date Report Issued: 08/21/2025

| Lab Sample #      | Client Sample ID | Sample Description     | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|------------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>01 | CORR 3-1<br>SW   | Corridor 3-1 Southwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>02 | CORR 3-1<br>NE   | Corridor 3-1 Northeast | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>03 | 301S             | Room 301               | Stl.            | 0.99                            | 7.20        | 7.30               | 5                           |
| 250821007.0<br>04 | 301F             | Room 301               | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>05 | 313S             | Room 313               | Stl.            | 0.99                            | <5          | <5                 | 5                           |
| 250821007.0<br>06 | 313F             | Room 313               | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10µg/sq ft, window sills not to exceed 100µg/sq ft, window troughs not to exceed 100µg/sq ft and porch floors not to exceed 40µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

Analyst: Sarah Hopkins

End of Report

QA/QC BY: *[Signature]*

N.C. Batta/A. Lewis (QA/QC Officer)

Dedicated to a Cleaner  
Environment Since 1982



NY ELAP# 11993  
PCM, PLM, TEM & LEAD



**BATTA LABORATORIES, LLC**  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302) 737-3376 Fax (302)-737-5764  
**Newark, DE - Columbia, MD -  
Philadelphia, PA**

Web: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)



EPA Lab ID #DE004

RP25082119



Lab Code: 101032-D

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/19/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|--------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>07 | 304S             | Room 304           | Stl.            | 0.97                            | 48.00       | 49.00              | 5                           |
| 250821007.0<br>08 | 304F             | Room 304           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>09 | 310S             | Room 310           | Stl.            | 0.99                            | <5          | <5                 | 5                           |
| 250821007.0<br>10 | 310F             | Room 310           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>11 | 202F             | Room 202           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>12 | 202S             | Room 202           | Stl.            | 1.01                            | 6.20        | 6.10               | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 ug/sq ft, window sills not to exceed 100 ug/sq ft, and window troughs not to exceed 400 ug/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10ug/sq ft, window sills not to exceed 100ug/sq ft, window troughs not to exceed 100ug/sq ft and porch floors not to exceed 40ug/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

**Analyst:** Sarah Hopkins

**End of Report**

**QA/QC BY:**   
N.C. Batta/A. Lewis (QA/QC Officer)



RP25082119

Dedicated to a Cleaner  
Environment Since 1982



NY ELAP# 11993  
PCM, PLM, TEM & LEAD

**batta**  
LABORATORIES

BATTA LABORATORIES, LLC  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302) 737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PA

Web: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)



**NVLAP**  
Lab Code: 101032-D

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/20/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|--------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>13 | 213F             | Room 213           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>14 | 213S             | Room 213           | Stl.            | 1.07                            | 25.00       | 23.00              | 5                           |
| 250821007.0<br>15 | 211S             | Room 211           | Stl.            | 1.12                            | 31.00       | 28.00              | 5                           |
| 250821007.0<br>16 | 211F             | Room 211           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>17 | 205S             | Room 205           | Stl.            | 1.00                            | 43.00       | 43.00              | 5                           |
| 250821007.0<br>18 | 205F             | Room 205           | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10µg/sq ft, window sills not to exceed 100µg/sq ft, window troughs not to exceed 100µg/sq ft and porch floors not to exceed 40µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

**Analyst:** Sarah Hopkins

**End of Report**

**QA/QC BY:** *[Signature]*

N.C. Batta/A. Lewis (QA/QC Officer)

Dedicated to a Cleaner  
Environment Since 1982



NY ELAP# 11993  
PCM, PLM, TEM & LEAD



**BATTA LABORATORIES, LLC**  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302) 737-3376 Fax (302)-737-5764  
**Newark, DE - Columbia, MD -  
Philadelphia, PA**

Web: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)



EPA Lab ID #DE004

**NVLAP**

Lab Code: 101032-D

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/20/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description   | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|----------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>19 | 216S             | Room 216             | Stl.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>20 | 216F             | Room 216             | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>21 | CORR 2-2<br>A C  | Corridor 2-2A Center | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>22 | CORR 2-2<br>A SW | Corridor 2-2A        | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>23 | 208S             | Room 208             | Stl.            | 1.00                            | 11.00       | 11.00              | 5                           |
| 250821007.0<br>24 | 208F             | Room 208             | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10µg/sq ft, window sills not to exceed 100µg/sq ft, window troughs not to exceed 100µg/sq ft and porch floors not to exceed 40µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

**Analyst:** Sarah Hopkins

**End of Report**

**QA/QC BY:** *[Signature]*  
N.C. Batta/A. Lewis (QA/QC Officer)



RP25082119

Dedicated to a Cleaner  
Environment Since 1982



NY ELAP# 11993  
PCM, PLM, TEM & LEAD

**batta**  
LABORATORIES

**BATTA LABORATORIES, LLC**  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302) 737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PA

Web: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)



EPA Lab ID #DE004

**NVLAP**<sup>®</sup>

Lab Code: 101032-D

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/20/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description  | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|---------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>25 | CORR 2-1<br>E    | Corridor 2-1 East   | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>26 | CORR 2-1<br>N    | Corridor 2-1 North  | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>27 | 104S             | Room 104            | Stl.            | 1.00                            | 7.30        | 7.30               | 5                           |
| 250821007.0<br>28 | 104F             | Room 104            | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>29 | 111F             | Room 111            | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>30 | CORR 1-1<br>S    | Corridor 1-1 Center | Flr.            | 1.00                            | 150.00      | 150.00             | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, window troughs not to exceed 100 µg/sq ft and porch floors not to exceed 40 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

**Analyst:** Sarah Hopkins

**End of Report**

**QA/QC BY:** *[Signature]*  
N.C. Batta/A. Lewis (QA/QC Officer)



RP25082119

Dedicated to a Cleaner  
Environment Since 1982NY ELAP# 11993  
PCM, PLM, TEM & LEAD**batta**  
LABORATORIESBATTA LABORATORIES, LLC  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302) 737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PAWeb: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)

EPA Lab ID #DE004

**NVLAP**

Lab Code: 101032-D

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/20/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description     | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|------------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>31 | CORR 1-2<br>NW   | Corridor 1-2 Northwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>32 | CORR 1-3<br>NE   | Corridor 1-3 Northeast | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>33 | CORR 1-5<br>C    | Corridor 1-5 Center    | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>34 | 1-1 NE           | Corridor 1-1 Northeast | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>35 | 131 F            | Room 131               | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>36 | 101F             | Room 101               | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC, NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10µg/sq ft, window sills not to exceed 100µg/sq ft, window troughs not to exceed 100µg/sq ft and porch floors not to exceed 40µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

Analyst: Sarah Hopkins

End of Report

QA/QC BY: N.C. Batta/A. Lewis  
N.C. Batta/A. Lewis (QA/QC Officer)

Dedicated to a Cleaner  
Environment Since 1982



NY ELAP# 11993  
PCM, PLM, TEM & LEAD



**BATTA LABORATORIES, LLC**  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302) 737-3376 Fax (302)-737-5764  
**Newark, DE - Columbia, MD -  
Philadelphia, PA**

Web: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)



EPA Lab ID #DE004



Lab Code: 101032-D

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/20/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description     | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|------------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>37 | 101S             | Room 101               | Stl.            | 1.30                            | 61.00       | 47.00              | 5                           |
| 250821007.0<br>38 | CORR 1-5<br>NW   | Corridor 1-3 Northwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>39 | CORR 1-6<br>SW   | Corridor 1-6 Southwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>40 | CORR 1-1<br>SW   | Corridor 1-1 Southwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>41 | CORR 1-5<br>SE   | Corridor 1-5 Southeast | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>42 | 132F             | Room 132               | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 ug/sq ft, window sills not to exceed 100 ug/sq ft, and window troughs not to exceed 400 ug/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10ug/sq ft, window sills not to exceed 100ug/sq ft, window troughs not to exceed 100ug/sq ft and porch floors not to exceed 40ug/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

**Analyst:** Sarah Hopkins

**End of Report**

**QA/QC BY:** N.C. Batta/A. Lewis  
N.C. Batta/A. Lewis (QA/QC Officer)



RP25082119

Dedicated to a Cleaner  
Environment Since 1982NY ELAP# 11993  
PCM, PLM, TEM & LEAD**batta**  
LABORATORIESBATTA LABORATORIES, LLC  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302)737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PAWeb: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)**NVLAP**  
Lab Code: 101032-D

## REPORT OF ANALYSIS

**Report#:** RP25082119  
**Project Number:** 250821007  
**Project Name:** The Sigma Group, Inc.  
**Project Location:** 971 W. Windlake Ave. Milwaukee, WI 53204  
**Analyte Requested:** Lead  
**Method:** Test Method: NIOSH 9100 / NIOSH 7082  
**Matrix:** Wipe

**Date Sampled:** 08/20/2025  
**Sampled By:** Client  
**Date Received:** 08/21/2025  
**Date Analyzed:** 08/21/2025  
**Date Report Issued:** 08/21/2025

| Lab Sample #      | Client Sample ID | Sample Description      | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|-------------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>43 | 109F             | Room 109                | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>44 | CORR G-1<br>A NW | Corridor G-1A Northwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>45 | CORR G-1<br>SW   | Corridor G-1 Southwest  | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>46 | CORR G-1<br>B NW | Corridor G-1B Northwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>47 | CORR G-1<br>NE   | Corridor G-1 Northeast  | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>48 | 005F             | Room 005                | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 ug/sq ft, window sills not to exceed 100 ug/sq ft, and window troughs not to exceed 400 ug/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10ug/sq ft, window sills not to exceed 100ug/sq ft, window troughs not to exceed 100ug/sq ft and porch floors not to exceed 40ug/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).**Analyst:** Sarah Hopkins**End of Report****QA/QC BY:**   
N.C. Batta/A. Lewis (QA/QC Officer)



RP25082119

Dedicated to a Cleaner  
Environment Since 1982NY ELAP# 11993  
PCM, PLM, TEM & LEAD**batta**  
LABORATORIESBATTA LABORATORIES, LLC  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302) 737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PAWeb: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)

EPA Lab ID #DE004

**NVLAP**

Lab Code: 101032-D

## REPORT OF ANALYSIS

**Report#:** RP25082119  
**Project Number:** 250821007  
**Project Name:** The Sigma Group, Inc.  
**Project Location:** 971 W. Windlake Ave. Milwaukee, WI 53204  
**Analyte Requested:** Lead  
**Method:** Test Method: NIOSH 9100 / NIOSH 7082  
**Matrix:** Wipe

**Date Sampled:** 08/20/2025  
**Sampled By:** Client  
**Date Received:** 08/21/2025  
**Date Analyzed:** 08/21/2025  
**Date Report Issued:** 08/21/2025

| Lab Sample #      | Client Sample ID | Sample Description | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|--------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>49 | 003F             | Room 003           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>50 | 011S             | Room 011           | Stl.            | 2.40                            | 7.70        | 3.20               | 5                           |
| 250821007.0<br>51 | 011F             | Room 011           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>52 | 012F             | Room 012           | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>53 | 012S             | Room 012           | Stl.            | 2.40                            | <5          | <2                 | 5                           |
| 250821007.0<br>54 | 014F             | Room 014           | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10µg/sq ft, window sills not to exceed 100µg/sq ft, window troughs not to exceed 100µg/sq ft and porch floors not to exceed 40µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).Analyst: Sarah Hopkins

End of Report

QA/QC BY: N.C. Batta/A. Lewis  
N.C. Batta/A. Lewis (QA/QC Officer)

Dedicated to a Cleaner  
Environment Since 1982



NY ELAP# 11993  
PCM, PLM, TEM & LEAD



**BATTA LABORATORIES, LLC**  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302)737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PA

Web: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)



EPA Lab ID #DE004



Lab Code: 101032-D

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/20/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description     | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|------------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>55 | 014S             | Room 114               | Stl.            | 2.40                            | <5          | <2                 | 5                           |
| 250821007.0<br>56 | 016F             | Room 116               | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>57 | 016S             | Room 116               | Stl.            | 1.88                            | 6.20        | 3.30               | 5                           |
| 250821007.0<br>58 | 017S             | Room 117               | Stl.            | 1.77                            | 33.00       | 19.00              | 5                           |
| 250821007.0<br>59 | 017F             | Room 117               | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>60 | CORR G-2<br>SE   | Corridor G-2 Southeast | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10µg/sq ft, window sills not to exceed 100µg/sq ft, window troughs not to exceed 100µg/sq ft and porch floors not to exceed 40µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

**Analyst:** Sarah Hopkins

**End of Report**

**QA/QC BY:**   
N.C. Batta/A. Lewis (QA/QC Officer)



RP25082119

EPA Lab ID #DE004

Dedicated to a Cleaner  
Environment Since 1982**batta**  
LABORATORIES

BATTA LABORATORIES, LLC

Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817

Tel. (302)737-3376 Fax (302)-737-5764

Newark, DE - Columbia, MD -  
Philadelphia, PAWeb: <http://www.battaenv.com>E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)**NVLAP**<sup>®</sup>

Lab Code: 101032-D

NY ELAP# 11993  
PCM, PLM, TEM & LEAD

## REPORT OF ANALYSIS

|                           |                                          |                            |            |
|---------------------------|------------------------------------------|----------------------------|------------|
| <b>Report#:</b>           | RP25082119                               | <b>Date Sampled:</b>       | 08/20/2025 |
| <b>Project Number:</b>    | 250821007                                | <b>Sampled By:</b>         | Client     |
| <b>Project Name:</b>      | The Sigma Group, Inc.                    | <b>Date Received:</b>      | 08/21/2025 |
| <b>Project Location:</b>  | 971 W. Windlake Ave. Milwaukee, WI 53204 | <b>Date Analyzed:</b>      | 08/21/2025 |
| <b>Analyte Requested:</b> | Lead                                     | <b>Date Report Issued:</b> | 08/21/2025 |
| <b>Method</b>             | Test Method: NIOSH 9100 / NIOSH 7082     |                            |            |
| <b>Matrix:</b>            | Wipe                                     |                            |            |

| Lab Sample #      | Client Sample ID | Sample Description     | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|------------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250821007.0<br>61 | CORR G-2<br>NW   | Corridor G-2 Northwest | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>62 | 018F             | Room 018               | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250821007.0<br>63 | CORR G-3<br>SE   | Corridor G-3 Southeast | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 µg/sq ft, window sills not to exceed 100 µg/sq ft, and window troughs not to exceed 400 µg/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10µg/sq ft, window sills not to exceed 100µg/sq ft, window troughs not to exceed 100µg/sq ft and porch floors not to exceed 40µg/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

Analyst: Sarah Hopkins

End of Report

QA/QC BY: ANALYST  
N.C. Batta/A. Lewis (QA/QC Officer)



## CHAIN OF CUSTODY

BL Project #: **R102215**

| Customer Billing Information                                                                                      |                              | Shipping Information                                                                                   |                      | Turnaround Times            |                      | Method of Payment                                 |                                    |
|-------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------------------------------------------------------|----------------------|-----------------------------|----------------------|---------------------------------------------------|------------------------------------|
| Name:                                                                                                             | The Sigma Group              | Picked up by BATT                                                                                      |                      | 6-12 Hours / Rush (*Note 1) |                      | <input type="checkbox"/> Cash                     |                                    |
| Billing Address 1:                                                                                                | 1800 W Canal ST              | <input type="checkbox"/> Delivered by customer                                                         |                      | 24 Hours (*Note 2)          |                      | <input type="checkbox"/> Visa/MasterCard/Discover |                                    |
| Billing Address 2:                                                                                                | Milwaukee, WI 53233          | <input type="checkbox"/> Shipped by customer                                                           |                      | 48 Hours (*Note 3)          |                      | <input type="checkbox"/> Money Order              |                                    |
| Phone:                                                                                                            | 414 659 4300                 |                                                                                                        |                      | 72 Hours (*Note 4)          |                      | <input type="checkbox"/> Purchase Order #         |                                    |
| Email:                                                                                                            | boenerbm@milwaukee.k12.wi.us |                                                                                                        |                      | 5 Days (*Note 5)            |                      | <input type="checkbox"/> Check #                  |                                    |
| Results To:                                                                                                       | boenerbm@milwaukee.k12.wi.us |                                                                                                        |                      | 10 Days (*Note 6)           |                      | <input type="checkbox"/> Other                    |                                    |
| * Notes Regarding Turnaround Times (TATs)                                                                         |                              |                                                                                                        |                      |                             |                      | <input type="checkbox"/> Unit Price/Quote         |                                    |
| Specific TATs depend on the test requested. TATs may not be available for all types of analysis.                  |                              |                                                                                                        |                      |                             |                      | <input type="checkbox"/> Total Payment            |                                    |
| *Note 1: Client must make arrangements with lab to guarantee 6-12 Hour/RUSH TAT - Call (855)-862-2882             |                              |                                                                                                        |                      |                             |                      | <input type="checkbox"/> Reference #:             |                                    |
| *Note 2: Unless a specific time is requested, results are guaranteed by 5pm on the following business day.        |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| *Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day.              |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| *Note 4: Unless a specific time is requested, results are guaranteed by 5pm on the 3rd business day.              |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| *Note 5: Unless a specific time is requested, results are guaranteed by 5pm on the 5th business day.              |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| *Note 6: Unless a specific time is requested, results are guaranteed by 5pm on the 10th business day.             |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| Client Project Information                                                                                        |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| Project Name: Lead Clearance Testing                                                                              |                              | Project Location: 971 W. Windlake Ave Milwaukee, WI 53204                                              |                      | Project #: Sigma #24270     |                      | Sampled By: Devin Gars                            |                                    |
| If solid waste, will results be used for disposal in NJ? <input type="checkbox"/> Yes <input type="checkbox"/> No |                              | Were the samples collected in New York state? <input type="checkbox"/> Yes <input type="checkbox"/> No |                      |                             |                      |                                                   |                                    |
| Sample Information                                                                                                |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| Lab Use Only                                                                                                      | Field Sample ID#             | Sample Location & Description                                                                          | Sampling Date & Time | Sampling width (in)         | Sampling length (in) | Sampling area (in <sup>2</sup> )                  | Sampling area (feet <sup>2</sup> ) |
| 001                                                                                                               | Corr 3-1 SW                  | Corridor 3-1 Southwest Fl                                                                              | 8/19/25 12:52        | 12                          | 12                   | 1                                                 | 1                                  |
| 002                                                                                                               | Corr 3-1 NE                  | Corridor 3-1 Northeast Fl                                                                              | 12:52 PM             | 12                          | 12                   | 1                                                 | 1                                  |
| 003                                                                                                               | 301 S                        | Room 301 Sill                                                                                          | 12:59 PM             | 5 1/2                       | 26                   | 1                                                 | 1                                  |
| 004                                                                                                               | 301 F                        | Room 301 Floor                                                                                         | 12:59 PM             | 12                          | 12                   | 1                                                 | 1                                  |
| 005                                                                                                               | 313 S                        | Room 313 Sill                                                                                          | 1:08 PM              | 6 1/2                       | 26                   | 1                                                 | 1                                  |
| 006                                                                                                               | 313 F                        | Room 313 Floor                                                                                         | 1:09 PM              | 12                          | 28                   | 1                                                 | 1                                  |
| 007                                                                                                               | 304 S                        | Room 304 Sill                                                                                          | 1:15 PM              | 5                           | 28                   | 0.97                                              | 0.97                               |
| 008                                                                                                               | 304 F                        | Room 304 Floor                                                                                         | 1:16 PM              | 12                          | 12                   | 1                                                 | 1                                  |
| 009                                                                                                               | 310 S                        | Room 310 Sill                                                                                          | 1:23 PM              | 8 1/2                       | 26                   | 1                                                 | 1                                  |
| 010                                                                                                               | 310 F                        | Room 310 Floor                                                                                         | 1:24 PM              | 12                          | 12                   | 1                                                 | 1                                  |
| Laboratory Use Only                                                                                               |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| Results                                                                                                           |                              | Date of Analysis                                                                                       |                      | Analyst                     |                      |                                                   |                                    |
|                                                                                                                   |                              | 8/21                                                                                                   |                      | SH                          |                      |                                                   |                                    |
| Special Instructions From Client:                                                                                 |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |
| Sample Relinquished By: X Devin Gars                                                                              |                              | Date: 8/21/25                                                                                          |                      | Time: 4:10 PM               |                      |                                                   |                                    |
| Sample Received By:                                                                                               |                              | Date: 8/21/25                                                                                          |                      | Time: 08:15                 |                      |                                                   |                                    |
| Field Samples Acceptable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                      |                              | Log-in Date: 8/21/25                                                                                   |                      | Log-in Time: 12:15          |                      |                                                   |                                    |
| Sample Condition:                                                                                                 |                              |                                                                                                        |                      |                             |                      |                                                   |                                    |

For solid waste samples: Before solid waste materials such as soil, ash, sludge, dredge spoils, etc. are disposed in New Jersey, they must undergo analysis following TCLP protocol. BATT Labs is not responsible for waste disposal misrepresentations on this document. Document Control Item AM5

For drinking water samples: For results to be valid, lab must receive samples on ice and within 48 hours of collection. For air samples collected by NIOSH 7400 and 7402: In accordance with these NIOSH methods, two field blanks, (or 10% of the number of field samples submitted, whichever is greater) must be submitted and be analyzed with field samples.

### CHAIN OF CUSTODY

BL Project #: **2102215**

| Customer Billing Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                  | Shipping Information                                                                                              |                      | Turnaround Times                                                                                                              |                                                   | Method of Payment       |                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------|---------------------------|
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                  |                                                                                                                   |                      | <input type="checkbox"/> 6-12 Hours / Rush (*Note 1)                                                                          | <input type="checkbox"/> Cash                     |                         |                           |
| Billing Address 1:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |                                                                                                                   |                      | <input type="checkbox"/> 24 Hours (*Note 2)                                                                                   | <input type="checkbox"/> Visa/MasterCard/Discover |                         |                           |
| Billing Address 2:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |                                                                                                                   |                      | <input type="checkbox"/> 48 Hours (*Note 3)                                                                                   | <input type="checkbox"/> Money Order              |                         |                           |
| Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |                                                                                                                   |                      | <input type="checkbox"/> 72 Hours (*Note 4)                                                                                   | <input type="checkbox"/> Purchase Order #         |                         |                           |
| Email:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |                                                                                                                   |                      | <input type="checkbox"/> 5 Days (*Note 5)                                                                                     | <input type="checkbox"/> Check #                  |                         |                           |
| Results To:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                                                                                                                   |                      | <input type="checkbox"/> 10 Days (*Note 6)                                                                                    | <input type="checkbox"/> Other                    |                         |                           |
| <p><b>* Notes Regarding Turnaround Times (TATs)</b></p> <p>Specific TATs depend on the test requested. TATs may not be available for all types of analysis.</p> <p>*Note 1: Client must make arrangements with lab to guarantee 6-12 Hour/RUSH TAT - Call (855) 862-2882</p> <p>*Note 2: Unless a specific time is requested, results are guaranteed by 5pm on the following business day.</p> <p>*Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day.</p> |                  | <p><b>250821007</b></p>                                                                                           |                      | <p><b>250821007</b></p>                                                                                                       |                                                   |                         |                           |
| Project Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  | Project Location:                                                                                                 |                      | Project #: Sigma #24270                                                                                                       |                                                   | Sampled By:             |                           |
| If solid waste, will results be used for disposal in NJ? Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                          |                  | Were the samples collected in New York state? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |                      |                                                                                                                               |                                                   |                         |                           |
| Sample Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |                                                                                                                   |                      |                                                                                                                               |                                                   |                         |                           |
| Lab Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Field Sample ID# | Sample Location & Description                                                                                     | Sampling Date & Time | width (in)                                                                                                                    | length (in)                                       | area (in <sup>2</sup> ) | area (feet <sup>2</sup> ) |
| 011                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 202F             | Room 202 Floor                                                                                                    | 8/20/15 8:14am       | 12                                                                                                                            | 12                                                | 1                       | 1                         |
| 012                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 202S             | Room 202 Sill                                                                                                     | 8:18am               | 5                                                                                                                             | 29                                                | 1                       | 1                         |
| 013                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 213F             | Room 213 Floor                                                                                                    | 8:28am               | 12                                                                                                                            | 12                                                | 1                       | 1                         |
| 014                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 213S             | Room 213 Sill                                                                                                     | 8:28am               | 5 1/2                                                                                                                         | 28                                                | 1                       | 1                         |
| 015                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 211S             | Room 211 Sill                                                                                                     | 8:40am               | 5 3/4                                                                                                                         | 28                                                | 1                       | 1.12                      |
| 016                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 211F             | Room 211 Floor                                                                                                    | 8:40am               | 12                                                                                                                            | 12                                                | 1                       | 1                         |
| 017                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 205S             | Room 205 Sill                                                                                                     | 8:49am               | 4 1/4                                                                                                                         | 34                                                | 1                       | 1                         |
| 018                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 205F             | Room 205 Floor                                                                                                    | 8:44am               | 12                                                                                                                            | 12                                                | 1                       | 1                         |
| 019                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 216S             | Room 216 Sill                                                                                                     | 8:44am               | 4 1/4                                                                                                                         | 34                                                | 1                       | 1                         |
| 020                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 216F             | Room 216 Floor                                                                                                    | 8:44am               | 12                                                                                                                            | 12                                                | 1                       | 1                         |
| Laboratory Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                  |                                                                                                                   |                      |                                                                                                                               |                                                   |                         |                           |
| Results                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date of Analysis | Test Method                                                                                                       | Sample Type          | Analyst                                                                                                                       |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 8/21             |                                                                                                                   | dust wipe            | SH                                                                                                                            |                                                   |                         |                           |
| Special Instructions From Client:                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  |                                                                                                                   |                      |                                                                                                                               |                                                   |                         |                           |
| Sample Relinquished By: X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                  | Date: 8/21/15                                                                                                     | Time: 0915           | Logged-in by: CM                                                                                                              |                                                   | Log-in Date: 8/21/15    | Date: 12:15               |
| Sample Received By:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                  | Time:                                                                                                             |                      | Field Samples Acceptable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> On Ice |                                                   | Sample Condition:       |                           |

For drinking water samples: for results to be valid, lab must receive samples on ice and within 48 hours of collection. For air samples collected by NIOSH 7400 and 7402: in accordance with these NIOSH methods, two field blanks. (or 10% of the number of field samples submitted, whichever is greater) must be submitted and be analyzed with field samples.

For solid waste samples: Before solid waste materials such as soil, ash, sludge, dredge spoils, etc. are disposed in New Jersey, they must undergo analysis following TCLP protocol. BATTAL Labs is not responsible for waste disposal misrepresentations on this document. Document Control Item AM5



## CHAIN OF CUSTODY

BL Project #: R102215

| Customer Billing Information |  | Shipping Information                           |  | Time around Times                                    |                                                   | Method of Payment |  |
|------------------------------|--|------------------------------------------------|--|------------------------------------------------------|---------------------------------------------------|-------------------|--|
| Name:                        |  |                                                |  | <input type="checkbox"/> 6-12 Hours / Rush (*Note 1) | <input type="checkbox"/> Cash                     |                   |  |
| Billing Address 1:           |  |                                                |  | <input type="checkbox"/> 24 Hours (*Note 2)          | <input type="checkbox"/> Visa/MasterCard/Discover |                   |  |
| Billing Address 2:           |  |                                                |  | <input type="checkbox"/> 48 Hours (*Note 3)          | <input type="checkbox"/> Money Order              |                   |  |
| Phone:                       |  | <input type="checkbox"/> Picked up by BATTA    |  | <input type="checkbox"/> 72 Hours (*Note 4)          | <input type="checkbox"/> Purchase Order #         |                   |  |
| Email:                       |  | <input type="checkbox"/> Delivered by customer |  | <input type="checkbox"/> 5 Days (*Note 5)            | <input type="checkbox"/> Check #                  |                   |  |
| Results To:                  |  | <input type="checkbox"/> Shipped by customer   |  | <input type="checkbox"/> 10 Days (*Note 6)           | <input type="checkbox"/> Other                    |                   |  |

### \* Notes Regarding Turnaround Times (TATs)

Specific TATs depend on the test requested. TATs may not be available for all types of analysis.  
 \*Note 1: Client must make arrangements with lab to guarantee 6-12 Hour/RUSH TAT - Call (855) 862-2882  
 \*Note 2: Unless a specific time is requested, results are guaranteed by 5pm on the following business day.  
 \*Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day.  
 \*Note 4: Unless a specific time is requested, results are guaranteed by 5pm on the 3rd business day.  
 \*Note 5: Unless a specific time is requested, results are guaranteed by 5pm on the 5th business day.  
 \*Note 6: Unless a specific time is requested, results are guaranteed by 5pm on the 10th business day.

250821007

| Project Information |  | Client Project Information                                                                                        |             |
|---------------------|--|-------------------------------------------------------------------------------------------------------------------|-------------|
| Project Name:       |  | Project #: Sigma #24270                                                                                           | Sampled By: |
| Project Location:   |  | If solid waste, will results be used for disposal in NY? Yes <input type="checkbox"/> No <input type="checkbox"/> |             |
|                     |  | Were the samples collected in New York state? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |             |

| Lab Use Only | Field Sample ID# | Sample Location & Description | Sampling Date & Time | Sampling Info for Air / Surface Samples |             |                         |                           | Sample Type | Test Method | Laboratory Use Only |                  |
|--------------|------------------|-------------------------------|----------------------|-----------------------------------------|-------------|-------------------------|---------------------------|-------------|-------------|---------------------|------------------|
|              |                  |                               |                      | width (in)                              | length (in) | area (in <sup>2</sup> ) | area (feet <sup>2</sup> ) |             |             | Results             | Date of Analysis |
| 021          | Corr 2-2AC       | Corridor 2-2A center Floor    | 8/24/15 8:50am       | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     | 8/21 SH          |
| 022          | Corr 2-2ASW      | Corridor 2-2A southwest Floor | 8:53am               | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     |                  |
| 023          | Room 208 S       | Room 208 Sill                 | 8:55am               | 4 1/4                                   | 34          |                         | 1                         | dust wipe   |             |                     |                  |
| 024          | Room 208 F       | Room 208 Floor                | 8:55am               | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     |                  |
| 025          | Corr 2-1E        | Corridor 2-1 East Floor       | 8:59am               | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     |                  |
| 026          | Corr 2-1N        | Corridor 2-1 North Floor      | 8:59am               | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     |                  |
| 027          | Room 104 S       | Room 104 Sill                 | 9:30am               | 4 1/4                                   | 34          |                         | 1                         | dust wipe   |             |                     |                  |
| 028          | Room 104 F       | Room 104 Floor                | 9:30am               | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     |                  |
| 029          | Room 111 F       | Room 111 Floor                | 9:35am               | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     |                  |
| 030          | Corr 1-1 S       | Corridor 1-1 center           | 9:35am               | 12                                      | 12          |                         | 1                         | dust wipe   |             |                     |                  |

| Special Instructions From Client: |               |             |  | Laboratory Use Only |                      |             |  |
|-----------------------------------|---------------|-------------|--|---------------------|----------------------|-------------|--|
| Sample Relinquished By: X         | Date: 8/24/15 | Time: 08:15 |  | Logged-in by: CM    | Log-in Date: 8/21/15 | Date: 12:15 |  |
| Sample Received By:               | ACM           |             |  |                     |                      |             |  |
|                                   |               |             |  |                     |                      |             |  |

For drinking water samples: for results to be valid, lab must receive samples on ice and within 48 hours of collection. For air samples collected by NIOSH 7400 and 7402: in accordance with these NIOSH methods, two field blanks, (or 10% of the number of field samples submitted, whichever is greater) must be submitted and be analyzed with field samples.

For solid waste samples: Before solid waste materials such as soil, ash, sludge, dredge spoils, etc. are disposed in New Jersey, they must undergo analysis following TCLP protocol. BATTA Labs is not responsible for waste disposal misrepresentations on this document. Document Control Item AM5



## CHAIN OF CUSTODY

BL Project #: 2102215

| Customer Billing Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                  | Shipping Information                                                                                                                       |                      | Turnaround Times                                                                                                                           |                                                   | Method of Payment       |                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------|---------------------------|
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                  |                                                                                                                                            |                      | <input type="checkbox"/> 6-12 Hours / Rush (*Note 1)                                                                                       | <input type="checkbox"/> Cash                     |                         |                           |
| Billing Address 1:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                                                                                                                                            |                      | <input type="checkbox"/> 24 Hours (*Note 2)                                                                                                | <input type="checkbox"/> Visa/MasterCard/Discover |                         |                           |
| Billing Address 2:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                                                                                                                                            |                      | <input type="checkbox"/> 48 Hours (*Note 3)                                                                                                | <input type="checkbox"/> Money Order              |                         |                           |
| Phone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  | <input type="checkbox"/> Picked up by BATTAL                                                                                               |                      | <input type="checkbox"/> 72 Hours (*Note 4)                                                                                                | <input type="checkbox"/> Purchase Order #         |                         |                           |
| Email:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  | <input type="checkbox"/> Delivered by customer                                                                                             |                      | <input type="checkbox"/> 5 Days (*Note 5)                                                                                                  | <input type="checkbox"/> Check #                  |                         |                           |
| Results To:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  | <input type="checkbox"/> Shipped by customer                                                                                               |                      | <input type="checkbox"/> 10 Days (*Note 6)                                                                                                 | <input type="checkbox"/> Other                    |                         |                           |
| <p><b>* Notes Regarding Turnaround Times (TATs)</b></p> <p>Specific TATs depend on the test requested. TATs may not be available for all types of analysis.</p> <p>*Note 1: Client must make arrangements with lab to guarantee 6-12 Hour RUSH TAT - Call (855)-862-2882</p> <p>*Note 2: Unless a specific time is requested, results are guaranteed by 5pm on the following business day.</p> <p>*Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day.</p> <p>*Note 4: Unless a specific time is requested, results are guaranteed by 5pm on the 3rd business day.</p> <p>*Note 5: Unless a specific time is requested, results are guaranteed by 5pm on the 5th business day.</p> <p>*Note 6: Unless a specific time is requested, results are guaranteed by 5pm on the 10th business day.</p> |                  |                                                                                                                                            |                      |                                                                                                                                            |                                                   |                         |                           |
| Project Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                  | Project Location:                                                                                                                          |                      | If solid waste, will results be used for disposal in NJ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> |                                                   | Project #: Sigma #24270 |                           |
| Sampled By:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  | Were the samples collected in New York state? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |                      |                                                                                                                                            |                                                   |                         |                           |
| Sample Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                                                                                                                                            |                      |                                                                                                                                            |                                                   |                         |                           |
| Lab Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Field Sample ID# | Sample Location & Description                                                                                                              | Sampling Date & Time | width (in)                                                                                                                                 | length (in)                                       | area (in <sup>2</sup> ) | area (feet <sup>2</sup> ) |
| 031                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Corr 1-2 NW      | Corridor 1-2 Northwest Floor                                                                                                               | 8/20/25 9:45         | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 032                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Corr 1-3 NE      | Corridor 1-3 Northeast Floor                                                                                                               | 9:45 am              | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 033                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Corr 1-5 C       | Corridor 1-5 Center Floor                                                                                                                  | 9:47 am              | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 034                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Corr 1-1 NE      | Corridor 1-1 Northeast Floor                                                                                                               | 9:49 am              | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 035                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 131 F            | Room 131 Floor                                                                                                                             | 9:50 am              | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 036                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 101 F            | Room 101 Floor                                                                                                                             | 9:55 am              | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 037                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 101 S            | Room 101 Sill                                                                                                                              | 10:00 am             | 5 1/2                                                                                                                                      | 34                                                |                         | 1.30                      |
| 038                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Corr 1-5 NW      | Corridor 1-5 Northwest Floor                                                                                                               | 10:05 am             | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 039                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Corr 1-6 SW      | Corridor 1-6 Southwest Floor                                                                                                               | 10:05 am             | 12                                                                                                                                         | 12                                                |                         | 1                         |
| 040                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Corr 1-1 SW      | Corridor 1-1 Southwest Floor                                                                                                               | 10:01 am             | 12                                                                                                                                         | 12                                                |                         | 1                         |
| Laboratory Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                  |                                                                                                                                            |                      |                                                                                                                                            |                                                   |                         |                           |
| Results                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Date of Analysis | Analyst                                                                                                                                    | Sample Type          | Test Method                                                                                                                                |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 8/21             | SH                                                                                                                                         | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  |                                                                                                                                            | dust wipe            |                                                                                                                                            |                                                   |                         |                           |
| Special Instructions From Client:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                  |                                                                                                                                            |                      |                                                                                                                                            |                                                   |                         |                           |
| Sample Relinquished By: X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                  | Date:                                                                                                                                      | Time:                |                                                                                                                                            |                                                   |                         |                           |
| Sample Received By: Agm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  | Date: 8/21/25                                                                                                                              | Time: 0815           |                                                                                                                                            |                                                   |                         |                           |
| Field Samples Acceptable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> On Ice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                  | Sample Condition:                                                                                                                          |                      |                                                                                                                                            |                                                   |                         |                           |
| Sample #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                  | Sample Condition:                                                                                                                          |                      |                                                                                                                                            |                                                   |                         |                           |

For solid waste samples: Before solid waste materials such as soil, ash, sludge, dredge spoils, etc. are disposed in New Jersey, they must undergo analysis following TCLP protocol. BATTAL Labs is not responsible for waste disposal misrepresentations on this document. Document Control Item AM5

For drinking water samples: For results to be valid, lab must receive samples on ice and within 48 hours of collection. For air samples collected by NIOSH 7400 and 7402: in accordance with these NIOSH methods, two field blanks, (or 10% of the number of field samples submitted, whichever is greater) must be submitted and be analyzed with field samples.

**Corporate Headquarters**  
6 Garfield Way  
Newark, DE 19713

Ph: (855) 86-BATTA Email: [BattaLaboratories@baltav.com](mailto:BattaLaboratories@baltav.com)  
 Fax: (302) 737-5764 Web: <https://baltav.com>

NVLAP: 101032  
AIHA LAP, LLC: 100448  
NY ELAP: 11993  
EPA Lab: DE004  
MD Lab: 263

Page 5 of 7

# CHAIN OF CUSTODY

BL Project #: B102215

Lab Code: 101032-0

| Customer Billing Information:                                                                             |  |                  | Shipping Information                           |                                                                                                                              | Turnaround Times<br>(check all that apply)                                                                        |             | Method of Payment                                 |                           |
|-----------------------------------------------------------------------------------------------------------|--|------------------|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------|---------------------------|
| Name:                                                                                                     |  |                  | Picked up by BATTA                             |                                                                                                                              | <input type="checkbox"/> 6-12 Hours / Rush (*Note 1)                                                              |             | <input type="checkbox"/> Cash                     |                           |
| Billing Address 1:                                                                                        |  |                  | <input type="checkbox"/> Delivered by customer |                                                                                                                              | <input type="checkbox"/> 24 Hours (*Note 2)                                                                       |             | <input type="checkbox"/> Visa/MasterCard/Discover |                           |
| Billing Address 2:                                                                                        |  |                  | <input type="checkbox"/> Shipped by customer   |                                                                                                                              | <input type="checkbox"/> 48 Hours (*Note 3)                                                                       |             | <input type="checkbox"/> Money Order              |                           |
| Phone:                                                                                                    |  |                  |                                                |                                                                                                                              | <input type="checkbox"/> 72 Hours (*Note 4)                                                                       |             | <input type="checkbox"/> Purchase Order #         |                           |
| Email:                                                                                                    |  |                  |                                                |                                                                                                                              | <input type="checkbox"/> 5 Days (*Note 5)                                                                         |             | <input type="checkbox"/> Check #                  |                           |
| Results To:                                                                                               |  |                  |                                                |                                                                                                                              | <input type="checkbox"/> 10 Days (*Note 6)                                                                        |             | <input type="checkbox"/> Other                    |                           |
| <b>* Notes Regarding Turnaround Times (TATs)</b>                                                          |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| Specific TATs depend on the test requested. TATs may not be available for all types of analysis           |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| *Note 1: Client must make arrangements with lab to guarantee 6-12 Hour/RUSH TAT - Call (855) 862-2882     |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| *Note 2: Unless a specific time is requested, results are guaranteed by 5pm on the following business day |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| *Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day       |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| *Note 4: Unless a specific time is requested, results are guaranteed by 5pm on the 3rd business day.      |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| *Note 5: Unless a specific time is requested, results are guaranteed by 5pm on the 5th business day.      |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| *Note 6: Unless a specific time is requested, results are guaranteed by 5pm on the 10th business day.     |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| Project Name:                                                                                             |  |                  | Project Location:                              |                                                                                                                              | If solid waste, will results be used for disposal in NJ? Yes <input type="checkbox"/> No <input type="checkbox"/> |             | Sampled By:                                       |                           |
|                                                                                                           |  |                  |                                                |                                                                                                                              | Were the samples collected in New York state? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |             | Project #: Sigma #24270                           |                           |
| <b>Client Project Information</b>                                                                         |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| <b>Sample Information</b>                                                                                 |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| Lab Use Only                                                                                              |  | Field Sample ID# | Sample Location & Description                  | Sampling Date & Time                                                                                                         | Sampling Info for Air / Surface Samples                                                                           |             | Sample Type                                       | Test Method               |
|                                                                                                           |  |                  |                                                |                                                                                                                              | width (in)                                                                                                        | length (in) | area (in <sup>2</sup> )                           | area (feet <sup>2</sup> ) |
| 041                                                                                                       |  | Corr 1-5 SE      | Corridor 1-5 southeast Floor                   | 8/21/25 10:08 am                                                                                                             | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 042                                                                                                       |  | 132 F            | Room 132 Floor                                 | 10:11 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 043                                                                                                       |  | 109 F            | Room 109 Floor                                 | 10:12 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 044                                                                                                       |  | Corr G-1A NW     | Corridor G-1A Northwest Floor                  | 11:01 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 045                                                                                                       |  | Corr G-1 SW      | Corridor G-1 Southwest Floor                   | 11:01 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 046                                                                                                       |  | Corr G-1B NW     | Corridor G-1B Northwest Floor                  | 11:05 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 047                                                                                                       |  | Corr G-1 NE      | Corridor G-1 Northeast Floor                   | 11:05 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 048                                                                                                       |  | 005 F            | Room 005 Floor                                 | 11:07 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 049                                                                                                       |  | 003 F            | Room 003 Floor                                 | 11:07 am                                                                                                                     | 12                                                                                                                | 12          | /                                                 | dust wipe                 |
| 050                                                                                                       |  | 011 S            | Room 011 Sill                                  | 11:13 am                                                                                                                     | 11 1/2                                                                                                            | 36          | 2.40                                              | dust wipe                 |
| <b>Laboratory Use Only</b>                                                                                |  |                  |                                                |                                                                                                                              |                                                                                                                   |             |                                                   |                           |
| Special Instructions From Client:                                                                         |  |                  |                                                | Date: 8/21/25 12:15                                                                                                          |                                                                                                                   |             |                                                   |                           |
| Sample Relinquished By: X                                                                                 |  |                  |                                                | Field Samples Acceptable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> On Ice |                                                                                                                   |             |                                                   |                           |
| Sample Received By:                                                                                       |  |                  |                                                | Sample #:                                                                                                                    |                                                                                                                   |             |                                                   |                           |
|                                                                                                           |  |                  |                                                | Sample Condition:                                                                                                            |                                                                                                                   |             |                                                   |                           |

For drinking water samples: for results to be valid, lab must receive samples on ice and within 48 hours of collection. For air samples collected by NIOSH 7400 and 7402: in accordance with these NIOSH methods, two field blanks, (or 10% of the number of field samples submitted whichever is greater) must be submitted and be analyzed with field samples.

**For solid waste samples:** Before solid waste materials such as soil, ash, sludge, dredge spoils, etc. are disposed in New Jersey, they must undergo analysis following TCLP protocol. BATTA Labs is not responsible for waste disposal misrepresentations on this document. Document Control Item AM5

**Corporate Headquarters**  
6 Garfield Way  
Newark, DE. 19713

**NVLAP**  
Lab Code: 101032-0

**Ph:** (855) 86-BATTA    **Email:** [BattaLaboratories@battaenv.com](mailto:BattaLaboratories@battaenv.com)  
**Fx:** (302) 737-5764    **Web:** <https://battaenv.com>

NVLAP: 101032  
AIHA LAP, LLC: 100448  
NY ELAP: 11993  
EPA Lab: DE004  
MID Lab: 263

Page 6 of 7

Page 6 of 7

# CHAIN OF CUSTODY

BL Project #: R102215

Customer Billing Information

Shipping Information

Turnaround Times

### Method of Payment

Name: \_\_\_\_\_

**Billing Address 1:**

Billing Address 2:

Phone:

Email:

Results To:

- ☐ Picked up by BATTa
- ☐ Delivered by customer
- ☐ Shipped by customer

☐ 6-12 Hours / Rush (\*Note 1)  
☐ 24 Hours (\*Note 2)  
☐ 48 Hours (\*Note 3)  
☐ 72 Hours (\*Note 4)  
☐ 5 Days (\*Note 5)  
☐ 10 Days (\*Note 6)

**\* Notes Regarding Turnaround Times (TATs)**

**Specific TATs depend on the test requested. TATs may not be available for all types of analysis.**

\*Note 1: Client must make arrangements with lab to guarantee 6-12 Hour/RUSH TAT - Call (855)-862-2892

\*Note 2: Unless a specific time is requested, results are guaranteed by 5pm on the 3rd business day.

\*Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 5th business day.

\*Note 4: Unless a specific time is requested, results are guaranteed by 5pm on the 10th business day.

\*Note 5: Unless a specific time is requested, results are guaranteed by 5pm on the 15th business day.

\*Note 1: Client must make arrangements with job to guarantee 6-12 Hour/PI SH TAT - Cell (855)-862-2882

**\*Note 2:** Unless a specific time is requested, results are guaranteed by 5pm on the following business day.

**\*Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day.**

## Client Project Information

Project Name:

**Project Location:**

If solid waste, will results be used for disposal in NJ? Yes ☐ No ☐

Were the samples collected in New York state? Yes ☐ No ☒

Project #: Sigma  
#24270

**Sampled By:**

## Sample Information

| Lab Use Only | Field Sample ID# | Sample Location & Description | Sampling Date & Time | Sampling Info for Air / Surface Samples: |             |                         |                           | Sample Type | Test Method | Laboratory Use Only |                  |         |
|--------------|------------------|-------------------------------|----------------------|------------------------------------------|-------------|-------------------------|---------------------------|-------------|-------------|---------------------|------------------|---------|
|              |                  |                               |                      | width (in)                               | length (in) | area (in <sup>2</sup> ) | area (feet <sup>2</sup> ) |             |             | Results             | Date of Analysis | Analyst |
| 051          | 011 F            | Room 011 Floor                | 8/20/25 11:14am      | 12                                       | 12          |                         | 1                         | dust wipe   |             |                     | 8/21             | SH      |
| 052          | 012 F            | Room 012 Floor                | 11:17am              | 12                                       | 12          |                         | 1                         | dust wipe   |             |                     |                  |         |
| 053          | 012 S            | Room 012 Sill                 | 11:17am              | 11 1/2                                   | 30          |                         | 2.40                      | dust wipe   |             |                     |                  |         |
| 054          | 014 F            | Room 014 Floor                | 11:21am              | 12                                       | 12          |                         | 1                         | dust wipe   |             |                     |                  |         |
| 055          | 014 S            | Room 014 Sill                 | 11:21am              | 11 1/2                                   | 30          |                         | 2.40                      | dust wipe   |             |                     |                  |         |
| 056          | 016 F            | Room 016 Floor                | 11:26am              | 12                                       | 12          |                         | 1                         | dust wipe   |             |                     |                  |         |
| 057          | 016 S            | Room 016 Sill                 | 11:26am              | 9                                        | 30          |                         | 1.87                      | dust wipe   |             |                     |                  |         |
| 058          | 017 S            | Room 017 Sill                 | 11:29am              | 8 1/2                                    | 30          |                         | 1.77                      | dust wipe   |             |                     |                  |         |
| 059          | 017 F            | Room 017 Floor                | 11:29am              | 12                                       | 12          |                         | 1                         | dust wipe   |             |                     |                  |         |
| 060          | Corr G-2 SE      | Corridor G-2 southeast Floor  | 11:33am              | 12                                       | 12          |                         | 1                         | dust wipe   |             |                     |                  |         |

Special Instructions From Client:

Date:
Time:

Date: 8/21/25
Time: 12:15

Date:
Time:

Date: 9/21/25
Time: 12:15

Date:
Time:

Date: 9/21/25
Time: 12:15

Date:
Time:

Date: 9/21/25
Time: 12:15

Date:
Time:

Date: 9/21/25
Time: 12:15

**For drinking water samples:** for results to be valid, lab must receive samples on ice and within 48 hours of collection. For air samples collected by NIOSH 7400 and 7402: in accordance with these NIOSH methods, two field blanks, (or 10% of the number of field samples submitted, whichever is greater) must be submitted and be analyzed with field samples.

**For solid waste samples:** Before solid waste materials such as soil, ash, sludge, dredge spoils, etc. are disposed in New Jersey, they must undergo analysis following TCLP protocol. BATTA Labs is not responsible for waste disposal misrepresentations on this document. Document Control Item AM5





RP25082724

Dedicated to a Cleaner  
Environment Since 1982NY ELAP# 11993  
PCM, PLM, TEM & LEAD**batta**  
LABORATORIESBATTA LABORATORIES, LLC  
Delaware Industrial Park, 6 Garfield Way  
Newark, DE 19713-5817  
Tel. (302)737-3376 Fax (302)-737-5764  
Newark, DE - Columbia, MD -  
Philadelphia, PAWeb: <http://www.battaenv.com>  
E-mail: [battaenv@battaenv.com](mailto:battaenv@battaenv.com)**NVLAP**  
Lab Code: 101032-D

## REPORT OF ANALYSIS

Report#: RP25082724

Project Number: 250827004

Project Name: The Sigma Group, Inc.

Project Location: 971 W Windlake Ave Milwaukee, WI

Analyte Requested: Lead

Method: Test Method: NIOSH 9100 / NIOSH 7082

Matrix: Wipe

Date Sampled: 08/26/2025

Sampled By: Client

Date Received: 08/27/2025

Date Analyzed: 08/27/2025

Date Report Issued: 08/27/2025

| Lab Sample #      | Client Sample ID | Sample Description  | Sample Location | Sampled Area (ft <sup>2</sup> ) | µg / sample | µg/ft <sup>2</sup> | Reporting Limit (µg/sample) |
|-------------------|------------------|---------------------|-----------------|---------------------------------|-------------|--------------------|-----------------------------|
| 250827004.0<br>01 | 103F             | Room 103            | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250827004.0<br>02 | CORR 1-1S        | Corridor 1-1 South  | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250827004.0<br>03 | CORR 1-1C        | Corridor 1-1 Center | Flr.            | 1.00                            | <5          | <5                 | 5                           |
| 250827004.0<br>04 | 112F             | Room 112            | Flr.            | 1.00                            | <5          | <5                 | 5                           |

Note: 1. Blank values were not subtracted from reported sample values; 2. Quality control results in this report are acceptable; 3. Results relate only to the items tested; 4. Batta Laboratories, Inc. is not responsible for sample collection, nor interpretations made by others; and 5. This report does not constitute endorsement by AIHA LAP, LLC., NVLAP and/or any other U.S. governmental agencies; 6. Lab results/calculations are reported in 2 significant figures. Clients data/measurements are reported as they were submitted; 7. EPA guidelines for clearance lead wipes have been set at the following levels: Floors not to exceed 10 ug/sq ft, window sills not to exceed 100 ug/sq ft, and window troughs not to exceed 400 ug/sq ft. Samples received in acceptable condition unless otherwise noted. 8. Clearance guidelines for OLHCHH, LBPHC and LHRD Grantees are set at the following levels: Floors not to exceed 10ug/sq ft, window sills not to exceed 100ug/sq ft, window troughs not to exceed 100ug/sq ft and porch floors not to exceed 40ug/sq ft. Samples received in acceptable condition unless otherwise noted. 9. Composite wipes are not covered by AIHA ELLAP under NLLAP Accreditation Program. 10. This report must not be reproduced without the written approval of BATTA Laboratories.

Batta Lab strives on customer feedback to improve the quality of our services. Please e-mail your feedback to [feedback@battaenv.com](mailto:feedback@battaenv.com).

Analyst: Sarah Hopkins

End of Report

QA/QC BY:   
N.C. Batta/A. Lewis (QA/QC Officer)



## CHAIN OF CUSTODY

BL Project #: R102215

| Customer Billing Information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                         | Shipping Information                        |                                   | Turnaround Times (check one, refer to notes)                                                                                                |                                                                                                                                                                                                              | Method of Payment |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------|----------------------|------------|-----------|-----------|-----------------------------|-------------|-------------|---------|------------------|---------|----|-------|----------------|---------------|----|----|--|---|-----------|--|--|------|----|----|-----------|--------------------------|----------|----|----|--|---|-----------|--|--|--|--|----|-----------|---------------------------|----------|----|----|--|---|-----------|--|--|--|--|----|-------|----------------|----------|----|----|--|---|-----------|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|
| Name: <u>The Sigma Group</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Billing Address 1: <u>1300 W. Canal St</u>              | Picked up by BATTA <input type="checkbox"/> | 6-12 Hours / Rush (*Note 1)       | <input type="checkbox"/> Cash                                                                                                               | <input type="checkbox"/> Visa/MasterCard/Discover<br><input type="checkbox"/> Money Order<br><input type="checkbox"/> Purchase Order #<br><input type="checkbox"/> Check #<br><input type="checkbox"/> Other |                   |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| Billing Address 2: <u>M. Lurker, WI 53733</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Delivered by customer <input type="checkbox"/>          | 24 Hours (*Note 2)                          | <input type="checkbox"/> 24 Hours | <input type="checkbox"/> Visa/MasterCard/Discover                                                                                           |                                                                                                                                                                                                              |                   |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| Phone: <u>414-643-4200</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Shipped by customer <input checked="" type="checkbox"/> | 48 Hours (*Note 3)                          | <input type="checkbox"/> 48 Hours | <input type="checkbox"/> Money Order                                                                                                        |                                                                                                                                                                                                              |                   |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| Email: <u>Bernard Berner</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         | 72 Hours (*Note 4)                          | <input type="checkbox"/> 72 Hours | <input type="checkbox"/> Purchase Order #                                                                                                   |                                                                                                                                                                                                              |                   |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| Results To: <u>Bernard Berner</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                         | 5 Days (*Note 5)                            | <input type="checkbox"/> 5 Days   | <input type="checkbox"/> Check #                                                                                                            |                                                                                                                                                                                                              |                   |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| <p><b>* Notes Regarding Turnaround Times (TATs)</b></p> <p>Specific TATs depend on the test requested. TATs may not be available for all types of analysis.</p> <p>*Note 1: Client must make arrangements with lab to guarantee 6-12 Hour/RUSH TAT - Call (855)-862-2882</p> <p>*Note 2: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day.</p> <p>*Note 3: Unless a specific time is requested, results are guaranteed by 5pm on the 2nd business day.</p> <p>*Note 4: Unless a specific time is requested, results are guaranteed by 5pm on the 3rd business day.</p> <p>*Note 5: Unless a specific time is requested, results are guaranteed by 5pm on the 5th business day.</p> <p>*Note 6: Unless a specific time is requested, results are guaranteed by 5pm on the 10th business day.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                         | <p>25082700A</p>                            |                                   | <p>Unit Price/Quote <input type="checkbox"/></p> <p>Total Payment <input type="checkbox"/></p> <p>Reference #: <input type="checkbox"/></p> |                                                                                                                                                                                                              |                   |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| <p align="center"><b>Client Project Information</b></p> <p>Project Name: <u>Lead Clearance 971 W Windlake Ave, Milwaukee, WI</u></p> <p>Project Location: <u>971 W Windlake Ave, Milwaukee, WI</u></p> <p>Project #: <u>Sigma #24270</u></p> <p>Sampled By: <u>Devin Carver</u></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             |                                                                                                                                                              |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| <p align="center"><b>Sample Information</b></p> <table border="1"> <thead> <tr> <th>Lab Use Only</th> <th>Field Sample ID#</th> <th>Sample Location &amp; Description</th> <th>Sampling Date &amp; Time</th> <th>Start Time</th> <th>Stop Time</th> <th>Flow Rate</th> <th>Ft<sup>2</sup> Volume/Area</th> <th>Sample Type</th> <th>Test Method</th> <th>Results</th> <th>Date of Analysis</th> <th>Analyst</th> </tr> </thead> <tbody> <tr> <td>01</td> <td>103 F</td> <td>Room 103 Floor</td> <td>8/24/25 10:50</td> <td>10</td> <td>12</td> <td></td> <td>1</td> <td>dust wipe</td> <td></td> <td></td> <td>8/27</td> <td>SH</td> </tr> <tr> <td>02</td> <td>Corr 1-1S</td> <td>Corridor 1-1 South Floor</td> <td>11:07 am</td> <td>12</td> <td>12</td> <td></td> <td>1</td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>03</td> <td>Corr 1-1C</td> <td>Corridor 1-1 Center Floor</td> <td>11:08 am</td> <td>12</td> <td>12</td> <td></td> <td>1</td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>04</td> <td>112 F</td> <td>Room 112 Floor</td> <td>10:56 am</td> <td>12</td> <td>12</td> <td></td> <td>1</td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>dust wipe</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | Lab Use Only                                                                                                                                                 | Field Sample ID# | Sample Location & Description | Sampling Date & Time | Start Time | Stop Time | Flow Rate | Ft <sup>2</sup> Volume/Area | Sample Type | Test Method | Results | Date of Analysis | Analyst | 01 | 103 F | Room 103 Floor | 8/24/25 10:50 | 10 | 12 |  | 1 | dust wipe |  |  | 8/27 | SH | 02 | Corr 1-1S | Corridor 1-1 South Floor | 11:07 am | 12 | 12 |  | 1 | dust wipe |  |  |  |  | 03 | Corr 1-1C | Corridor 1-1 Center Floor | 11:08 am | 12 | 12 |  | 1 | dust wipe |  |  |  |  | 04 | 112 F | Room 112 Floor | 10:56 am | 12 | 12 |  | 1 | dust wipe |  |  |  |  |  |  |  |  |  |  |  |  | dust wipe |  |  |  |  |  |  |  |  |  |  |  |  | dust wipe |  |  |  |  |  |  |  |  |  |  |  |  | dust wipe |  |  |  |  |  |  |  |  |  |  |  |  | dust wipe |  |  |  |  |  |  |  |  |  |  |  |  | dust wipe |  |  |  |  |  |  |  |  |  |  |  |  | dust wipe |  |  |  |  |  |  |  |  |  |  |  |  | dust wipe |  |  |  |  |
| Lab Use Only                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Field Sample ID#                                        | Sample Location & Description               | Sampling Date & Time              | Start Time                                                                                                                                  | Stop Time                                                                                                                                                                                                    | Flow Rate         | Ft <sup>2</sup> Volume/Area | Sample Type                                                                                                                                                  | Test Method      | Results                       | Date of Analysis     | Analyst    |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| 01                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 103 F                                                   | Room 103 Floor                              | 8/24/25 10:50                     | 10                                                                                                                                          | 12                                                                                                                                                                                                           |                   | 1                           | dust wipe                                                                                                                                                    |                  |                               | 8/27                 | SH         |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| 02                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Corr 1-1S                                               | Corridor 1-1 South Floor                    | 11:07 am                          | 12                                                                                                                                          | 12                                                                                                                                                                                                           |                   | 1                           | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| 03                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Corr 1-1C                                               | Corridor 1-1 Center Floor                   | 11:08 am                          | 12                                                                                                                                          | 12                                                                                                                                                                                                           |                   | 1                           | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| 04                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 112 F                                                   | Room 112 Floor                              | 10:56 am                          | 12                                                                                                                                          | 12                                                                                                                                                                                                           |                   | 1                           | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | dust wipe                                                                                                                                                    |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| <p align="center"><b>Special Instructions From Client:</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | <p align="center"><b>Laboratory Use Only</b></p>                                                                                                             |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| <p>Sample Relinquished By: <u>X Devin Carver</u></p> <p>Sample Received By: <u>SH</u></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | <p>Logged-in by: <u>CM</u></p> <p>Date: <u>8/27/25</u></p> <p>Time: <u>12:55</u></p>                                                                         |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |
| <p>Field Samples Acceptable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> On Ice</p> <p>Sample Condition:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                         |                                             |                                   |                                                                                                                                             |                                                                                                                                                                                                              |                   |                             | <p>Field Samples Acceptable <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> On Ice</p> <p>Sample Condition:</p> |                  |                               |                      |            |           |           |                             |             |             |         |                  |         |    |       |                |               |    |    |  |   |           |  |  |      |    |    |           |                          |          |    |    |  |   |           |  |  |  |  |    |           |                           |          |    |    |  |   |           |  |  |  |  |    |       |                |          |    |    |  |   |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |

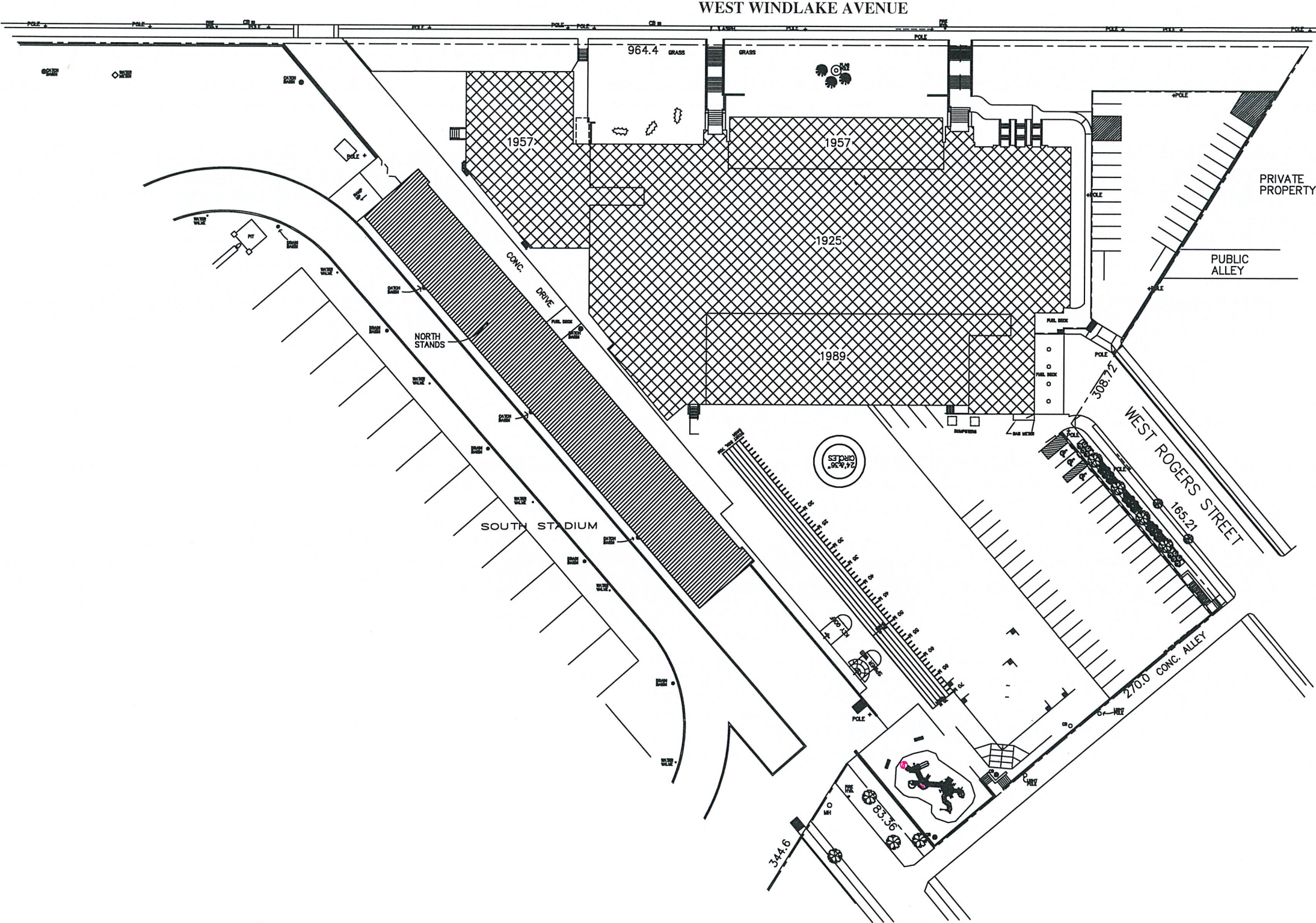
For solid waste samples: Before solid waste materials such as soil, ash, sludge, dredge spoils, etc. are disposed in New Jersey, they must undergo analysis following TCLP protocol. Batta Labs is not responsible for waste disposal misrepresentations on this document. Document Control Item AM5

For drinking water samples: for results to be valid, lab must receive samples on ice and within 48 hours of collection. For air samples collected by NIOSH 7400 and 7402: in accordance with these NIOSH methods, two field blanks. (or 10% of the number of field samples submitted, whichever is greater) must be submitted and be analyzed with field samples.

## **APPENDIX C**

---

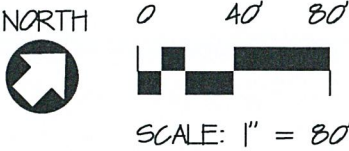
### **Floor Plans with All Sample Locations Marked**

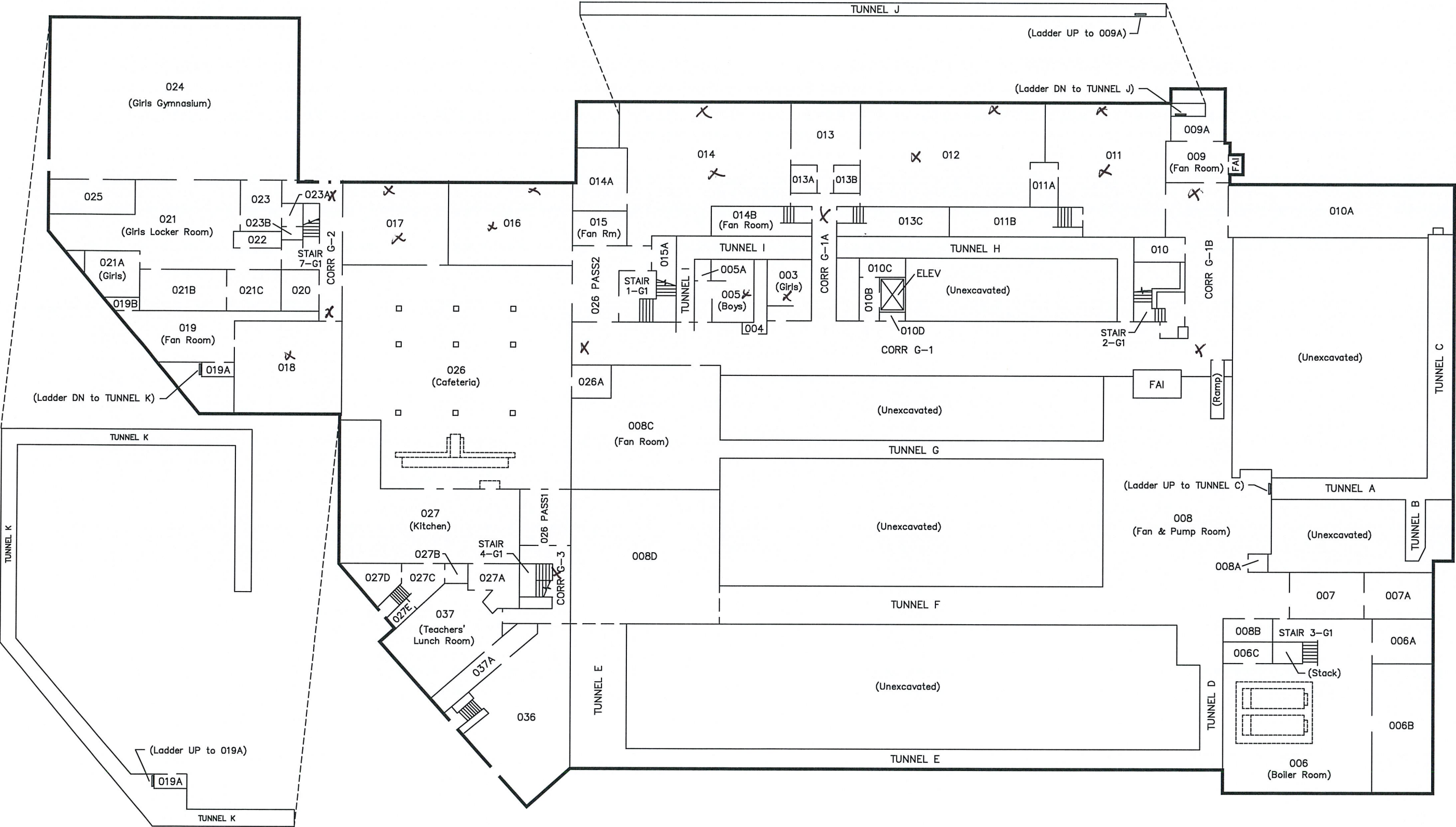


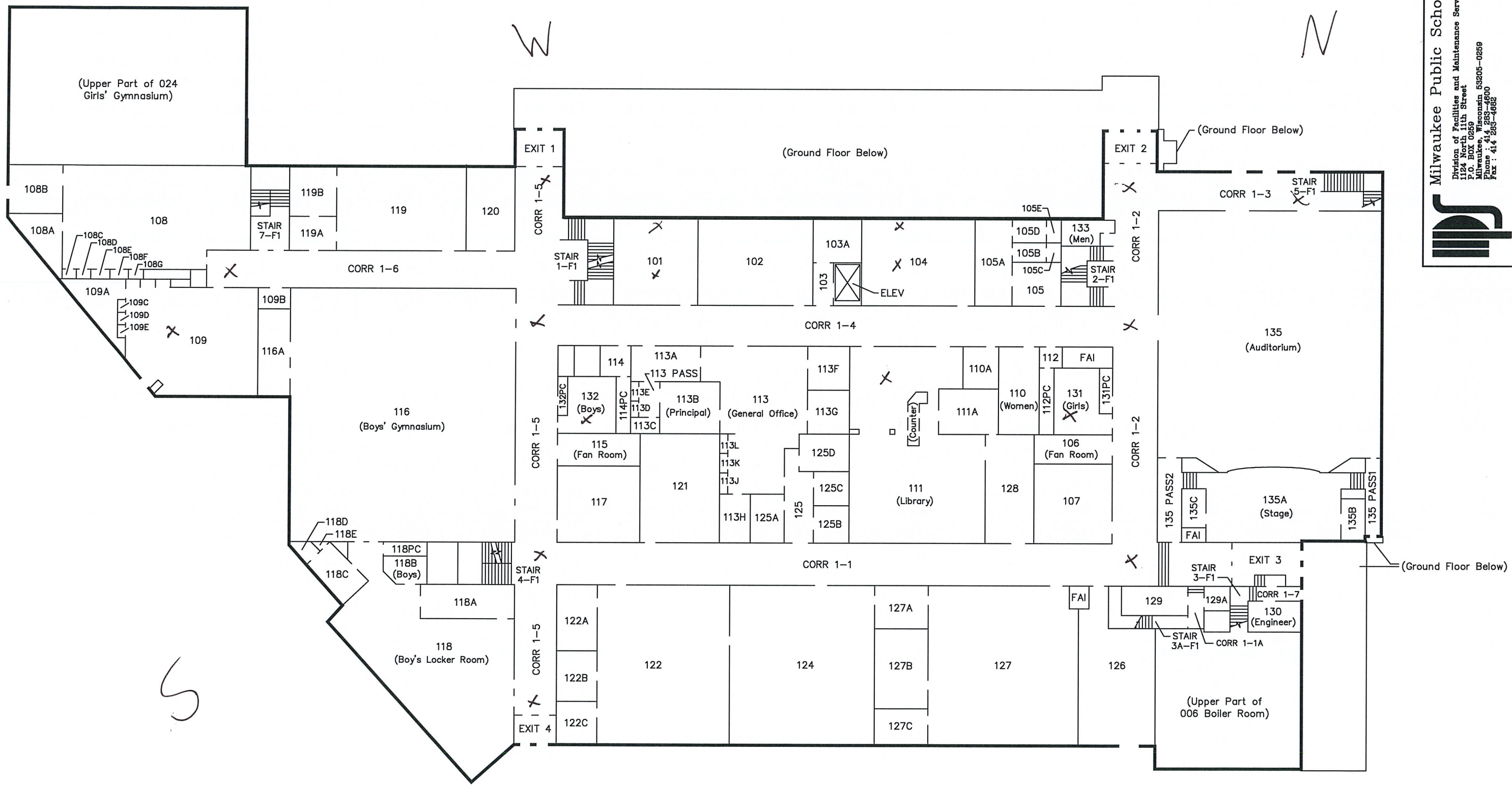
**Milwaukee Public Schools**  
Division of Facilities and Maintenance Services  
1124 North 11th Street  
P.O. BOX 0259  
Milwaukee, Wisconsin 53205-0259  
Phone : 414.283-4800  
Fax : 414.283-4662

SITE PLAN

SITE NO: 050 - KOSCIUSZKO MIDDLE SCHOOL  
971 W. WINDLAKE AVE., MILW., WI, 53204  
DATE: 4/19/10







Milwaukee Public Schools  
Division of Facilities and Maintenance Services  
1124 North 11th Street  
P.O. BOX 0259  
Milwaukee, Wisconsin 53205-0259  
Phone: 414-255-5000  
Fax: 414-255-4868

FIRST FLOOR PLAN

SITE NO: 050 - KOSCIUSZKO MIDDLE SCHOOL  
971 W. WINDLAKE AVE., MILW., WI, 53204  
DATE: 9/14/12

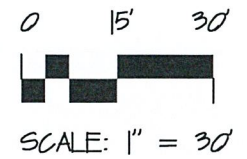
NORTH  
0 15' 30'  
SCALE: 1" = 30'

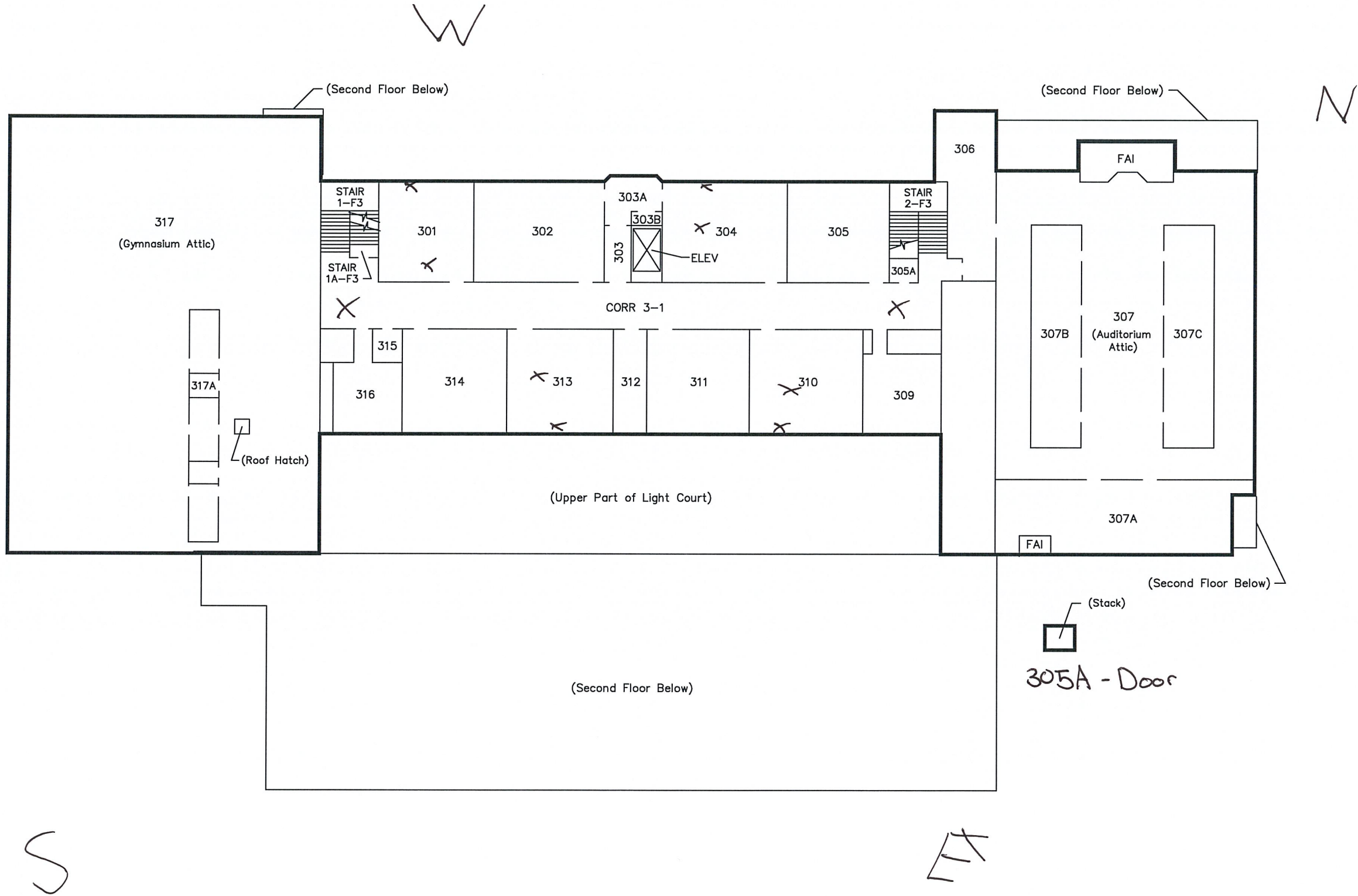
✓

N



**Milwaukee Public Schools**  
 Division of Facilities and Maintenance Services  
 1124 North 11th Street  
 P.O. BOX 0259  
 Milwaukee, Wisconsin 53208-0259  
 Phone : 414. 283-4800  
 Fax : 414. 283-4882





THIRD FLOOR PLAN

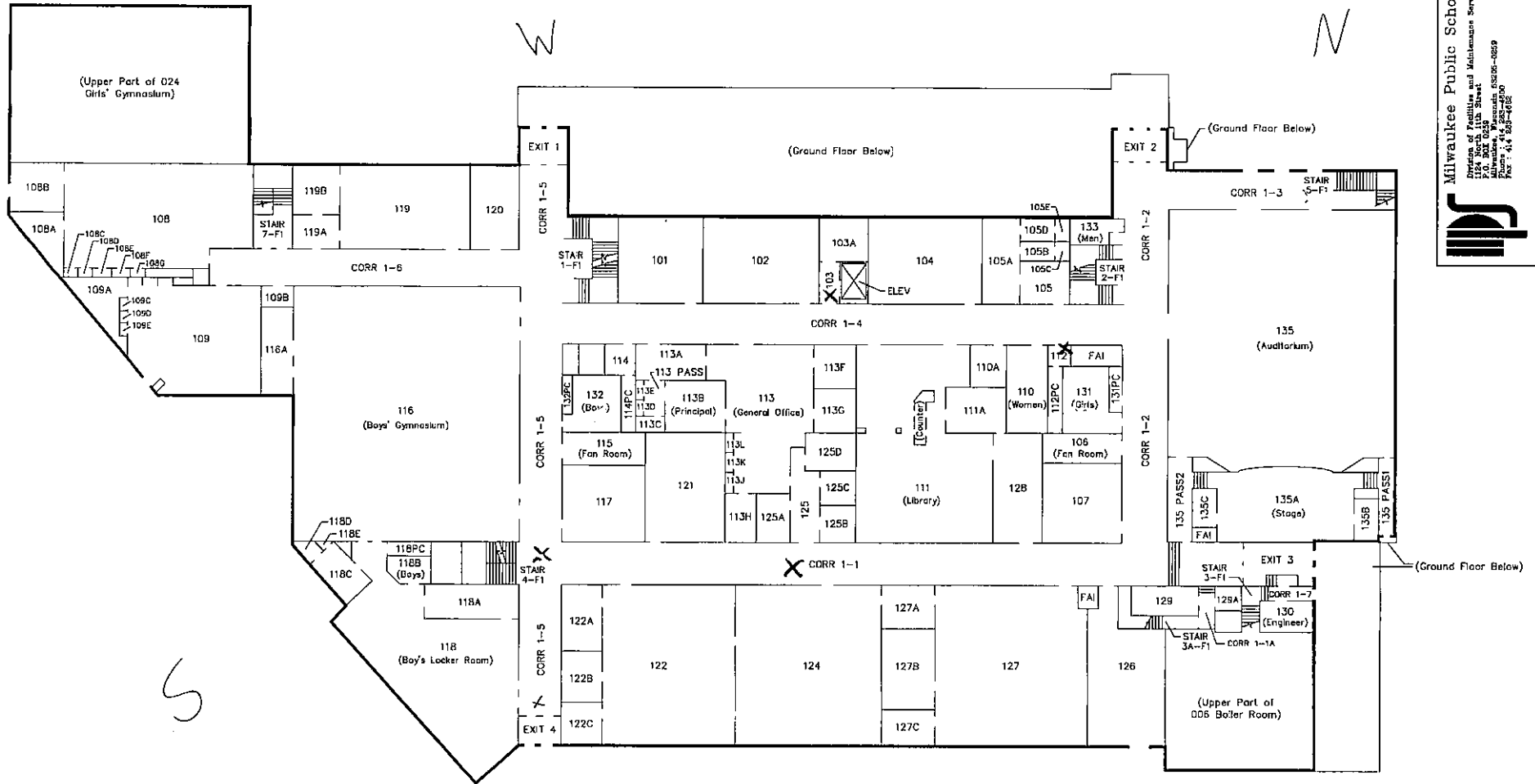
SITE NO: 050 - KOSCIUSZKO MIDDLE SCHOOL  
971 W. WINDLAKE AVE., MILW., WI, 53204  
DATE: 9/14/12

NORTH

0 15' 30'

SCALE: 1" = 30'

08/26/2025



**Milwaukee Public Schools**  
 Division of Facilities and Maintenance Services  
 1124 North 11th Street  
 Milwaukee, WI 53233  
 Phone: 414.224.4400  
 Fax: 414.224.4402

**FIRST FLOOR PLAN**

SITE NO: 050 - KOSCIUSZKO MIDDLE SCHOOL  
 971 W. WINDLAKE AVE., MILW., WI, 53204  
 DATE: 9/14/12

**NORTH**

0 15' 30'

**SCALE: 1" = 30'**

## **APPENDIX D**

---

### **Inspectors' Certificates**

## Lead Inspector Certification

|                                                                                   |                 |                          |        |
|-----------------------------------------------------------------------------------|-----------------|--------------------------|--------|
|  |                 | LEAD(PB) RISK ASSESSOR   |        |
|                                                                                   |                 | Issued By                |        |
|                                                                                   |                 | STATE OF WISCONSIN       |        |
|                                                                                   |                 | Dept. of Health Services |        |
|                                                                                   |                 | Devin Michael Gareis     |        |
|                                                                                   |                 | 1300 W Canal St          |        |
|                                                                                   |                 | Milwaukee WI 53233-2669  |        |
|                                                                                   |                 | 225 lbs                  | 6' 01" |
| LRA-297222                                                                        | Exp: 01/17/2027 | 09/14/1994               |        |
| Training due by: 01/17/2027                                                       |                 |                          |        |

## Lead Inspector Certification



LEAD(PB) RISK ASSESSOR

Issued By

STATE OF WISCONSIN

Dept. of Health Services

Yilda Beatriz Torres Rodriguez

587 Hartridge Dr

Hartland WI 53029-2659

|            |                 |            |  |
|------------|-----------------|------------|--|
|            |                 | lbs        |  |
| LRA-301689 | Exp: 06/23/2027 | 07/19/1993 |  |

Training due by: 06/23/2027