



(509) 662-1888
Fax: (509) 662-8183
3019 G. S. Center Road
Wenatchee, WA 98801

(509) 452-7707
Fax: (509) 452-7773
1008 W. Ahtanum Rd.
Union Gap, WA 98903

Batch: 757378
Client: Lake Chelan Reclamation

Account: 01034
Sampler: Jim Wisdom

PO Number:

- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 17-H014745
Sample Identification: LC-3-8

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	12.20	MPN/100mL		SM 9223B	6/12/17

Approved By Name:

Laura M...ek

Signature:

[Handwritten Signature]

Function:

[Handwritten Initials]

Cascade Analytical uses procedures established by EPA, AOAC, APHA, ASTM, and FDA/BAM. Cascade Analytical makes no warranty of any kind the client assumes all risk and liability from the use of these results. Cascade Analytical, Inc.'s liability to the client as a result of use of Cascade's test results shall be limited to a sum equal to the fees paid by the client to Cascade Analytical, Inc. for analysis. PLEASE REVIEW YOUR DATA IN A TIMELY MANNER. DATA GAPS OR ERRORS AFTER THREE MONTHS WILL NOT BE OUR RESPONSIBILITY. THOUGH WE DO KEEP ALL ANALYTICAL DATA FOR SEVERAL YEARS, SAMPLES ARE DISPOSED OF AFTER SIX WEEKS.



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1-800-545-4206

- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 17-H014746
Sample Identification: A-8-2

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	6.30	MPN/100mL		SM 9223B	6/12/17

Approved By Name:

Signature:

Function:

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Batch: 757378
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Account: 01034
Sampler: Jim Wisdom

PO Number:

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CASCADE ANALYTICAL, INC.
1-800-545-4206

- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 17-H014747
Sample Identification: A-3-17

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	8.40	MPN/100mL		SM 9223B	6/12/17

Approved By Name:

Signature:

Function:

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Client: Lake Chelan Reclamation

Account: 01034
Sampler: Jim Wisdom

PO Number:

- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 17-H014748
Sample Identification: B-4-12

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	18.70	MPN/100mL		SM 9223B	6/12/17

Approved By Name: *Laura M. [Signature]* Signature: *[Signature]*
Function: *[Signature]*

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Account: 01034
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- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Diet
PO Box J
Manzon, WA 98831

Laboratory Number: 17-H014749
Sample Identification: C-2-8

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	12.20	MPN/100mL		SM 9223B	6/12/17

Approved By Name: *Laura M. [Signature]*
Function: *[Signature]*

Signature: *[Signature]*

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Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 17-H014750
Sample Identification: D-3-6

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	6.30	MPN/100mL		SM 9223B	6/12/17

Approved By Name:

Signature:

Function:

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- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
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Laboratory Number: 17-H014751
Sample Identification: E-2-3

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	10.80	MPN/100mL		SM 9223B	6/12/17

Approved By Name:

Laura Powell

Signature:

[Handwritten Signature]

Function:

[Handwritten Signature]

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- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
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Laboratory Number: 17-H014752
Sample Identification: F-4

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	14.50	MPN/100mL		SM 9223B	6/12/17

Approved By Name: *Laura M. [Signature]* Signature: *[Signature]*
Function: *ARS*

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Account: 01034
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- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 17-H014753
Sample Identification: G-1-1

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	2.00	MPN/100mL		SM 9223B	6/12/17

Approved By Name: *Laura M... [Signature]* Signature: *[Signature]*
Function: *[Signature]*

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Account: 01034
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PO Number:

- HACCP/Food Safety Analytical Report -

Report Date: 6/13/17

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 17-H014754
Sample Identification: H-3

Date Received: 6/12/17
Date Sampled: 6/12/17

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	7.40	MPN/100mL _s		SM 9223B	6/12/17

Approved By Name: Laura M. [Signature] Signature: [Signature]
Function: RES

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