



(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: 881065
Client: Lake Chelan Reclamation

Account: 01034
Sampler: Jim Wisdom
PO Number:

- HACCP/Food Safety Analytical Report -

Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029624
Sample Identification: LC-3-8

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	2.00	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Function:

Signature:

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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- HACCP/Food Safety Analytical Report -

Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029625
Sample Identification: A-8-2

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	< 1	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Function:

LAB Supervisor

Signature:

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- HACCP/Food Safety Analytical Report -

Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029626
Sample Identification: A-3-17

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	< 1	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Function:

Signature:

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Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029627
Sample Identification: B-4-12

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	< 1	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Function:

Signature:

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Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029628
Sample Identification: C-2-8

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	8.50	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Signature:

Function:

LAB SUPERVISOR

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Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029629
Sample Identification: D-3-6

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	< 1	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Function:

Signature:

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Account: 01034
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PO Number:

- HACCP/Food Safety Analytical Report -

Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029630
Sample Identification: E-2-3

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	1.00	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Signature:

Function:

LAB Supervisor

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- HACCP/Food Safety Analytical Report -

Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029631
Sample Identification: F-4

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	< 1	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Function:

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Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029632
Sample Identification: G-1-1

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	2.00	MPN/100mL		SM 9223B	9/17/18

Approved By Name:

Function:

Signature:

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Report Date: 9/18/18

Lake Chelan Reclamation Dist
Dave Walters
PO Box J
Manson, WA 98831

Laboratory Number: 18-H029633
Sample Identification: H-3

Date Received: 9/17/18
Date Sampled: 9/17/18

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	< 1	MPN/100mL		SM 9223B	9/17/18

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