



District

CASCADE ANALYTICAL, INC.

1-800-545-4206

(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: 529379
Client: Lake Chelan Reclamation

Account: 01034
Sampler: Jim

PO Number:

~~- HACCP/Food Safety Analytical Report -~~

Report Date: 9/15/15

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 15-H027831
Sample Identification: LC-3-8

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	< 1	MPN/100mL		SM 9223B	9/14/15

Approved By Name: *Laura Mendenhall*

Signature: *Laura Mendenhall*

Function: *PRBS*

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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Report Date: 9/15/15

Laboratory Number: 15-H027832
Sample Identification: A-8-2

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	17.80	MPN/100mL		SM 9223B	9/14/15

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

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Report Date: 9/15/15

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 15-H027833
Sample Identification: A 3 17

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	8.70	MPN/100mL		SM 9223B	9/14/15

Approved By Name: *Lauren Marchet*
Function: *PRBC*

Signature: *Lauren Marchet*

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CASCADE ANALYTICAL, INC.
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~~HACCP/Food Safety Analytical Report~~

Report Date: 9/15/15

Lake Chelan Reclamation Dist
PO Box J
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Laboratory Number: 15-H027834
Sample Identification: B 4 12

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	16.40	MPN/100mL		SM 9223B	9/14/15

Approved By Name: *Lowell M...* Signature: *[Handwritten Signature]*
Function: *[Handwritten Signature]*

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Account: 01034
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Report Date: 9/15/15

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 15-H027836
Sample Identification: D 3 6

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	1.00	MPN/100mL		SM 9223B	9/14/15

Approved By Name: *Laura Marchek* Signature: *Laura Marchek*
Function: *FRBS*

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Report Date: 9/15/15

Lake Chelan Reclamation Dist
PO Box J
Manson, WA 98831

Laboratory Number: 15-H027837
Sample Identification: E-2-3

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	25.40	MPN/100mL		SM 9223B	9/14/15

Approved By Name: *Lauren M...* Signature: *Lauren M...*
Function: *PPS*

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Report Date: 9/15/15

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Laboratory Number: 15-H027838
Sample Identification: F 4

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	5.30	MPN/100mL		SM 9223B	9/14/15

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

Signature: *[Handwritten Signature]*

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Report Date: 9/15/15

Lake Chelan Reclamation Dist
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Laboratory Number: 15-H027839
Sample Identification: G 1-1

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E. Coli MPN Quanti-Tray NP	4.20	MPN/100mL		SM 9223B	9/14/15

Approved By Name: *Lauren M. [Signature]* Signature: *[Signature]*
Function: *PRCS*

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Lake Chelan Reclamation Dist
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Laboratory Number: 15-H027840
Sample Identification: H 3

Date Received: 9/14/15
Date Sampled: 9/14/15

Test Requested	Results	Units	RL	Method	Date Analyzed
E.Coli MPN Quanti-Tray NP	2.00	MPN/100mL		SM 9223B	9/14/15

Approved By Name: *LAURA MARSH*

Signature: *LAURA MARSH*

Function: *PRSE*

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