June 17, 2016

ATC Group Services
Attn: Mr. Robert Smith
46555 Humboldt, Suite 100
Novi, MI 48377

Project: School Drinking Water Testing

Dear Mr. Robert Smith,

Enclosed is a copy of the laboratory report for the following work order(s) received by TriMatrix Laboratories:

Work Order	Received	Description
1606098	06/03/2016	Child Star Development

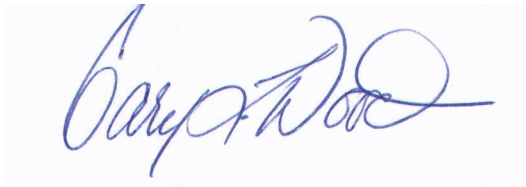
This report relates only to the sample(s) as received. Test results are in compliance with the requirements of the National Environmental Laboratory Accreditation Program (NELAP) and/or one of the following certification programs:

ANAB DoD-ELAP/ISO17025 (#ADE-1542); Arkansas DEP (#88-0730/13-049-0); Florida DEP (#E87622-24); Georgia EPD (#E87622-24); Illinois DEP (#200026/003329); Kentucky DEP (AL123065/#0021); Michigan DPH (#0034); Minnesota DPH (#491715); New York ELAP (#11776/53116); North Carolina DNRE (#659); Virginia DCLS (#460153/7952); Wisconsin DNR (#999472650); USDA Soil Import Permit (#P330-14-00305).

Any qualification or narration of results, including sample acceptance requirements and test exceptions to the above referenced programs, is presented in the Statement of Data Qualifications and Project Technical Narrative sections of this report. Estimates of analytical uncertainties and certification documents for the test results contained within this report are available upon request.

If you have any questions or require further information, please do not hesitate to contact me.

Sincerely,



Gary L. Wood
Project Chemist

5560 Corporate Exchange Court SE ♦ Grand Rapids, MI 49512 ♦ 616.975.4500 ♦ Fax 616.942.7463 ♦ www.trimatrixlabs.com

PROJECT TECHNICAL NARRATIVE(s)

No Project Narrative is associated with this report.

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STATEMENT OF DATA QUALIFICATIONS

All analyses have been validated and comply with our Quality Control Program.
No Qualification is required.

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1606098**
Project:	School Drinking Water Testing	Description:	Child Star Development
Client Sample ID:	**1-P-F Bathroom (Single)**	Sampled:	06/01/16 06:55
Lab Sample ID:	**1606098-01**	Sampled By:	ATC
Matrix:	Drinking Water	Received:	06/03/16 16:05

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/15/16 15:26	MSB	1606138

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1606098**
Project:	School Drinking Water Testing	Description:	Child Star Development
Client Sample ID:	**2-P-F Kitchen**	Sampled:	06/01/16 06:57
Lab Sample ID:	**1606098-03**	Sampled By:	ATC
Matrix:	Drinking Water	Received:	06/03/16 16:05

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/15/16 15:27	MSB	1606138

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TRIMATRIX LABORATORIES

ANALYTICAL REPORT

Client:	**ATC Group Services**	Work Order:	**1606098**
Project:	School Drinking Water Testing	Description:	Child Star Development
Client Sample ID:	**3-P-F Bathroom (Multi)**	Sampled:	06/01/16 06:59
Lab Sample ID:	**1606098-05**	Sampled By:	ATC
Matrix:	Drinking Water	Received:	06/03/16 16:05

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	By	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/15/16 15:28	MSB	1606138

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TRIMATRIX LABORATORIES

QUALITY CONTROL REPORT

Metals in Drinking Water by EPA 200 Series Methods

QC Type	Sample Conc.	Spike Qty.	Result	Unit	Spike % Rec.	Control Limits	RPD	RPD Limits	RL
Analyte: **Lead**/USEPA-200.8 Rev. 5.4									
QC Batch: 1606138 (Metals Direct Analysis)							Analyzed: 06/15/2016		By: MSB
Method Blank			<0.0010	mg/L					0.0010
Laboratory Control Sample		0.0400	**0.0403**	mg/L	101	85-115			0.0010

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TRIMATRIX LABORATORIES

PRETREATMENT SUMMARY PAGE

Client: **ATC Group Services**
Project: **School Drinking Water Testing**

Pretreatment	Lab Sample ID	Batch	By	Date & Time Prepared
USEPA 600/R-94/173	1606098-01	1606138	PNS	06/14/16 13:46
	1606098-03	1606138	PNS	06/14/16 13:46
	1606098-05	1606138	PNS	06/14/16 13:46

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TRIMATRIX LABORATORIES

Chain of Custody Record

COC No. 151019155

5560 Corporate Exchange Court SE, Grand Rapids, MI 49512
Phone (616) 975-4500 Fax (616) 942-7463 www.trimatrixlabs.com

Pg. ___ of ___

For Lab Use Only

Cart: 2
VOA Rack/Tray: -
Receipt Log No.: 12.30
Project Chemist: Jim McFadden
Work Order No.: 1606098

Client Name: ATC
Address: 46555 Humboldt Drive
City, State Zip: Novi, MI 48377
Phone: 248 667 5140 Fax: 5147
Email:

Project Name: Child Star Development
Client Project No. / P.O. No.: 188 BS 16209
Invoice To: ☑ Client ☐ Other (comments)
Contact/Report To: Rob Smith

Analyses Requested

Container Type (corresponds to Container Packing List): Lead Primary; Lead Flush

PRESERVATIVES
A NONE pH~7
B HNO_3 pH<2
C H_2SO_4 pH<2
D 1+1 HCl pH<2
E NaOH pH>12
F ZnAc/NaOH pH>9
G MeOH
H Other (note below)

Schedule	Matrix Code	Sample Number		Field Sample ID	Cooler ID	Sample Date	Sample Time	COMP	GRAB	Matrix	Number of Containers Submitted: Lead Primary	Lead Flush	Total	Sample Comments
01		01	1	1 - P-FBathroom (single)		6-1-16	6:55		X	PW	X			
02		02	2	1 - F-FBathroom (single)			6:56					X		
01		03	3	2 - P-FKitchen			6:57				X			
02		04	4	2 - F-FKitchen			6:58					X		
01		05	5	3 - P-FBathroom (multi)			6:59				X			
02		06	6	3 - F-FBathroom (multi)			7:02					X		
			7											
			8											
			9											
			10											

Sampled By (print): David Reinhold
Sampler's Signature:
Company: ATC

How Shipped? Hand ___ Carrier ___
Tracking No.

Comments: IF Lead (Primary) is above Detection Limits, analyze Flush samples (multi Bathroom Faucet closest to Door)

1. Relinquished By	Date	Time	2. Relinquished By	Date	Time	3. Relinquished By	Date	Time
[illegible]	6-3-16	[illegible]	Ray Johnson	6/3/16	1605			
1. Received By	**Date**	**Time**	**2. Received By**	**Date**	**Time**	**3. Received For Lab By**	**Date**	**Time**
Ray Johnson	6/3/16	1325				[signature]	6.3.16	1605

ORIGINAL - LABORATORY COPY - SAMPLER

SAMPLE RECEIVING / LOG-IN CHECKLIST

TRIMATRIX LABORATORIES

Client: ATC | Work Order #: 1606098
Receipt Record Page/Line #: 12-36 | New / Add To | Project Chemist | Sample #s: 01-06

Recorded by (initials/date): WC 6.3.16

Cooler ☑ | Box ☐ | Other ☐ | Qty Received: 2

Thermometer Used: ☐ IR Gun (#202) ☐ Digital Thermometer (#54) ☐ Other (#_____) | ☐ See Additional Cooler Information Form

Cooler #	Time	Custody Seals	Coolant Type	Coolant Location	Temp Blank Present	If Present, Temperature Blank Location is:
Tm2365	1655	☑ None ☐ Present / Intact ☐ Present / Not Intact	☐ Loose Ice ☐ Bagged Ice ☐ Blue Ice ☑ None	Dispersed / Top / Middle / Bottom	☐ Yes ☑ No	☐ Representative ☐ Not Representative
Tm3573	1700	☐ None ☐ Present / Intact ☐ Present / Not Intact	☐ Loose Ice ☐ Bagged Ice ☐ Blue Ice ☐ None	Dispersed / Top / Middle / Bottom	☐ Yes ☐ No	☐ Representative ☐ Not Representative
		☐ None ☐ Present / Intact ☐ Present / Not Intact	☐ Loose Ice ☐ Bagged Ice ☐ Blue Ice ☐ None	Dispersed / Top / Middle / Bottom	☐ Yes ☐ No	☐ Representative ☐ Not Representative
		☐ None ☐ Present / Intact ☐ Present / Not Intact	☐ Loose Ice ☐ Bagged Ice ☐ Blue Ice ☐ None	Dispersed / Top / Middle / Bottom	☐ Yes ☐ No	☐ Representative ☐ Not Representative

	Cooler 1 Observed °C	Cooler 1 Correction Factor °C	Cooler 1 Actual °C	Cooler 2 Observed °C	Cooler 2 Correction Factor °C	Cooler 2 Actual °C	Cooler 3 Observed °C	Cooler 3 Correction Factor °C	Cooler 3 Actual °C	Cooler 4 Observed °C	Cooler 4 Correction Factor °C	Cooler 4 Actual °C
Temp Blank:												
Sample 1:	23.8	-	23.8	22.2	-	22.2						
Sample 2:	23.8	-	23.8	22.0	-	22.0						
Sample 3:	23.9	-	23.9	22.2	-	22.2						
3 Sample Average °C:			23.8			22.2						
☐ Cooler ID on COC?												
☐ VOC Trip Blank received?												

If any shaded areas checked, complete Sample Receiving Non-Conformance and/or Inventory Form

Paperwork Received

Yes	No	
☑	☐	Chain of Custody record(s)? If No, Initiated By _____
☑	☐	Received for Lab Signed/Date/Time?
☐	☑	Shipping document?
☐	☑	Other _____

COC Information

☐ TriMatrix COC ☐ Other _____

COC ID Numbers:

Check COC for Accuracy

Yes	No	
☑	☐	Analysis Requested?
☑	☐	Sample ID matches COC?
☑	☐	Sample Date and Time matches COC?
☑		Container type completed on COC?
☑	☐	All container types indicated are received?

Sample Condition Summary

N/A	Yes	No	
	☐	☑	Broken containers/lids?
	☐	☑	Missing or incomplete labels?
	☐	☑	Illegible information on labels?
	☐	☑	Low volume received?
	☐	☑	Inappropriate or non-TriMatrix containers received?
☑	☐	☐	VOC vials / TOX containers have headspace?
☐	☐	☑	Extra sample locations / containers not listed on COC?

Check Sample Preservation

N/A	Yes	No	
	☑	☐	Temperature Blank OR average sample temperature, ≥6° C?
☐	☐	☐	If either is ≥6° C, was thermal preservation required?
☐	☐	☐	If "Yes", Project Chemist Approval Initials: _____
☐	☐	☐	If "Yes" Completed Non Con Cooler - Cont Inventory Form?
☐	☑	☐	Completed Sample Preservation Verification Form?
☐	☑	☐	Samples chemically preserved correctly?
☑	☐	☐	If "No", added orange tag?
		☐	Received pre-preserved VOC soils? ☐ MeOH ☐ Na_2SO_4

Check for Short Hold-Time Prep/Analyses

☐ Bacteriological
☐ Air Bags
☐ EnCores / Methanol Pre-Preserved
☐ Formaldehyde/Aldehyde
☐ Green-tagged containers
☐ Yellow/White-tagged 1 L ambers (SV Prep-Lab)

AFTER HOURS ONLY:
COPIES OF COC TO LAB AREA(S)
☑ NONE RECEIVED
☐ RECEIVED, COCs TO LAB(S)

Notes

☐ Trip Blank received ☐ Trip Blank not listed on COC

Cooler Received (Date/Time)	Paperwork Delivered (Date/Time)	≤1 Hour Goal Met?
6.3.16 1605	6.3.16 1730	Yes (No)

TRIMATRIX LABORATORIES

SAMPLE PRESERVATION VERIFICATION FORM

Client	ATC	Work Order #	1606098
Receipt Log #	12-36	Completed By (initials/date)	WC 6.3.16
		Project Chemist	GW

COC ID # 151019155

Adjusted by: _____ Date: _____

DO NOT ADJUST pH FOR THESE CONTAINER TYPES

pH Strip Reagent # 6040263

Container Type	5 / 23	4	13		6	15		
Tag Color	Lt. Blue	Blue	Brown		Red	Red Stripe		
Preservative	NaOH	H_2SO_4	H_2SO_4		HNO_3	HNO_3		
Expected pH	>12	<2	<2		<2	<2		
COC Line #1					✓			
COC Line #2					✓			
COC Line #3					✓			
COC Line #4					✓			
COC Line #5					✓			
COC Line #6					✓			
COC Line #7								
COC Line #8								
COC Line #9								
COC Line #10								

Comments

COC ID # _____

Adjusted by: _____ Date: _____

DO NOT ADJUST pH FOR THESE CONTAINER TYPES

Container Type	5 / 23	4	13		6	15		
Tag Color	Lt. Blue	Blue	Brown		Red	Red Stripe		
Preservative	NaOH	H_2SO_4	H_2SO_4		HNO_3	HNO_3		
Expected pH	>12	<2	<2		<2	<2		
COC Line #1								
COC Line #2								
COC Line #3								
COC Line #4								
COC Line #5								
COC Line #6								
COC Line #7								
COC Line #8								
COC Line #9								
COC Line #10								

Comments

Aqueous Samples: For each sample and container type, check the box if pH is acceptable. If pH is not acceptable for any sample container, record pH in box, and note on Sample Receiving Checklist and on Sample Receiving Non-Conformance Form. If approved by Project Chemist, add acid or base to the sample to achieve the correct pH. Add up to, but do not exceed 2x the volume initially added at container prep (see table below for initial volumes used). Add orange pH tag to sample container and record information requested. Record adjusted pH on this form. Do not adjust pH for container types 6 and 15.

Container Size (mL)	Original Vol. of Preservative (mL)
Container Type 5	NaOH
500	2.5
1000	5.0
Container Type 4	H_2SO_4
125	0.5
250	1.0
500	2.0
1000	4.0
Container Type 13	H_2SO_4
500	2.5