Res Well Bottle Requirements (Low level organics and inorganics)

VOCs
- four 40 ml glass vials
- HCl <2
- 14 days holding

ABNs/BNAs/Pest/PCB
- four 1 liter amber
- ice
- 7 days holding

Metals
- one 1 liter poly
- 5 ml 50% HNO3
- 6 months holding
- (not filtered)

ETS

S 7581E-01

Cyanide
- one 1 liter poly
- 5 ml NaOH
- 14 day holding
- (not filtered)

Mercury
- one 1 liter poly
- 10 ml mix of K2Cr2O7 and HNO3
- 26 day holding

Chloride/Sulfate
- one 1 liter poly
- ice
- 28 day holding

7525E -

Ecology

Nitrate/Ammonia
- one 1 liter poly
- 1 ml H2SO4 to pH<2
- 28 day holding

US EPA RECORDS CENTER REGION 5
471032

Date:
Client:
Project No.:

RW01 MS/MSD

	OTR-EMC-25	ITR-MELX-15	SAS 7525E-67
TAGS	V 150837-840	m. 150845-846	c/s 150851, 852
13:20	E 150841-844	c. 150847-848	N/A 150853, 854
		mer. 150849-850	

RW02

	OTR EMC-24	ITR-MELX-14	SAS E-68
1420	V 150855-858	m. 150863	c/s 150866
	E 150859-862	cy. 150864	A/N 150867
		mer. 150865	

RW03

	OTR-EMC-23	ITR-MEL~~X~~Z-21	SAS E-69
1640	V 150868-871	m. 150876	c/s 150879
	E 150871-75	cy. 150877	N/A 150888
		mer. 150878	

RW04

	OTR-EMC-22	ITR MELZ-22	E-70
1520	V 150881-884	m. 150889	c/s 150892
	E 150885-888	cy 150890	N/A 150893
		mer. 150891	

RW05

	OTR-EMC-21	ITR-MELLZ-23	E-71
	V 150894-897	m. 150902	c/s 150905
	E 150898-901	cy. 150903	N/A 150906
1540		mer. 150904	

Date:
Client:
Project No.:

RW06

OTR- EMC- 20	ITR- MELZ-24	E-72
V 150907-911	m 150916	C/S 150919
E 150912-915	cy 150917	N/A 150920
	mer. 150918	

RW06 Duplicate

OTR-19	ITR-MELZ-25	E-73
V 150921-924	m 150929	C/S 150932
E 150925-928	cy 150930	N/A 150933
	mer. 150931	

RW07

OTR- EMC-18	ITR- MELZ-26	E-74
V 150934-937	m 150942	C/S 150945
E 150938-941	cy 150943	N/A 150946
	mer. 150944	

RW08

OTR-EMC-17	ITR-MELZ-27	E-75
V 150947-950	m 150980	C/S 15983
E 150976-978	cy 150981	N/A 150984
	mer. 150982	

RW09

OTR- EMC-16	ITR- MELZ-28	E-76
V 150985-988	m 150993	C/S 150997
E 150989-992	cy 150994	N/A 150996
	mer. 150995	

RW10 OTR-15 EMC	ITR- MELZ-29	E-77
V 150998-951	m 150956 mer. 150958	C/S 150958
E 150952-955	cy 150957	N/A 150960

Date:
Client:
Project No.:

Smo Niva 703-519-1360

Date Shipped - 10-29-92

ORGANICS CASE - 19063
SAS - 7597E-01
AIRBILL - 4196080350

American Analytical + Technical

11 water Full Scan Complete

INORGANICS Case - 19063
SAS - 7581E-01
Airbill - 4196080361

11 water Metals Cyanide, Mercury Complete

SAS 7525E
Airbill - 4196080372

11 water Sulfate/Chloride
Nitrite/Nitrate/Ammonia

Not Complete

Date:
Client:
Project No.:

ORGANICS

American Analytical + Technical Services
1700 West Albany, Suite A
Broken Arrow, OK 74012

Case # 19063

SAS # 7597E-01

ATTN: Missy Namby

(918) 251-0545

INORGANICS

ETS Analytical Services
1401 Municipal Road N.W.
Roanoke, VA 24012

Case 19063

SAS # 7581E-01

ATTN: Susan Sheppard

Ph. (703) 265 0004

SAS

Ecology + Environment, Inc.
4285 Genesee Street
Buffalo, NY 14225

7525E

ATTN: Barbara Krajewski

Ph (716) 631-0360

FEDERAL EXPRESS

USE THIS AIRBILL FOR SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO AND ALL NON U.S. LOCATIONS.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

AIRBILL
PACKAGE
TRACKING NUMBER

4196080383

4196080383

SENDER'S COPY

SENDER'S COPY
DROP OFF YOUR PACKAGE AND SAVE

1 SENDER'S FEDERAL EXPRESS ACCOUNT NUMBER [illegible] | Date [illegible]

From (Your Name) Please Print: [illegible] | Your Phone Number (Very Important): [illegible]

Company: [illegible] | Department/Floor No.

Street Address: [illegible]

City: [illegible] | State: [illegible] | ZIP Required: [illegible]

2 To (Recipient's Name) Please Print: Becky [illegible] | Recipient's Phone Number (Very Important): (503) 752 [illegible]

Company: EHRT | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.): 3235 Omar [illegible]

City: [illegible] | State: OR | ZIP Required: [illegible]

YOUR INTERNAL BILLING REFERENCE INFORMATION (optional) (First 24 characters will appear on invoice.): [illegible]

H IF HOLD FOR PICK-UP, Print FEDEX Address Here
Street Address
City | State | ZIP Required

3 PAYMENT
1 [X] Bill Sender Acct. No. Req'd
2 [ ] Bill Recipient's FedEx Acct. No. Fill in Account Number below
3 [ ] Bill 3rd Party FedEx Acct. No. Fill in Account Number below (req'd)
4 [ ] Bill Credit Card Fill in Credit Card No. below (req'd)
5 [ ] Cash/Check
Acct./Credit Card No. _____ Exp. Date ____

4 SERVICES (Check only one box)

Priority Overnight (Delivery by next business morning†)	Standard Overnight (Delivery by next business afternoon†)
11 [X] YOUR PACKAGING	51 [ ] YOUR PACKAGING
16 [ ] FEDEX LETTER *	56 [ ] FEDEX LETTER *
12 [ ] FEDEX PAK *	52 [ ] FEDEX PAK *
13 [ ] FEDEX BOX	53 [ ] FEDEX BOX
14 [ ] FEDEX TUBE	54 [ ] FEDEX TUBE
Economy Two-Day (Delivery by second business day†)	**Government Overnight** (Restricted for authorized users only)
30 [X] ECONOMY	46 [ ] GOVT LETTER
	41 [ ] GOVT PACKAGE

Freight Service (for Extra Large or any package over 150 lbs.)
70 [ ] OVERNIGHT FREIGHT ** (Contained reservation required)
80 [ ] TWO-DAY FREIGHT **

† Delivery commitment may be later in some areas
* Declared Value Limit $100.
** Call for delivery schedule.

5 DELIVERY AND SPECIAL HANDLING (Check services required)

1 [ ] HOLD FOR PICK-UP (Fill in Box H)
2 [X] DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) (Not available to all locations) [ ]
4 [ ] DANGEROUS GOODS (Extra charge)
5 [ ]
6 [ ] DRY ICE _____ Lbs
7 [ ] OTHER SPECIAL SERVICE _____
8 [ ]
9 [ ] SATURDAY PICK-UP (Extra charge)
10 [ ]
11 [ ] DESCRIPTION
12 [ ] HOLIDAY DELIVERY (If offered) (Extra charge)

6

PACKAGES	WEIGHT In Pounds Only	YOUR DECLARED VALUE (See right)
1		
1	1	
Total 2	Total 1	Total

DIM SHIPMENT (Chargeable Weight)
[ ] ____ lbs.
____ x ____ x ____ = ____

Received At
1 [ ] Regular Stop
2 [ ] On-Call Stop
3 [ ] Drop Box
4 [ ] BSC
5 [ ] Station

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

Use of this airbill constitutes your agreement to the service conditions in our current Service Guide, available upon request. See back of sender's copy of this airbill for information. Service conditions may vary for Government Overnight Service. See U.S. Government Service Guide for details.

We will not be responsible for any claim in excess of $100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, and document your actual loss for a timely claim. Limitations found in the current Federal Express Service Guide apply. Your right to recover from Federal Express for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of $100 or the declared value specified to the left. Recovery cannot exceed actual documented loss. The maximum Declared Value for FedEx Letter and FedEx Pak packages is $100.00.

In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

7 Release Signature _____

FedEx Emp. No. | Date/Time

Federal Express Use
Base Charges
Declared Value Charge
Other 1
Other 2
Total Charges

REVISION DATE 6/91
PART #137205 GBFE
FORMAT #099

099

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FEDERAL EXPRESS

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USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO AND ALL NON U.S. LOCATIONS.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

AIRBILL
PACKAGE TRACKING NUMBER

4196080394

4196080394

SENDER'S COPY

SENDER'S COPY
DROP OFF YOUR PACKAGE AND SAVE

1 SENDER'S FEDERAL EXPRESS ACCOUNT NUMBER: 0495-0534-1 | Date: 10 29 92

From (Your Name) Please Print	Your Phone Number (Very Important)	**2** To (Recipient's Name) Please Print	Recipient's Phone Number (Very Important)
[illegible]	([illegible])	Brian L	( )
Company: [illegible]	Department/Floor No.	Company: Hazco	Department/Floor No.
Street Address: 27975 E [illegible] St.		Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.): 2006 Springboro West	
City: [illegible] State: MI	ZIP Required: [illegible]	City: Dayton State: OH	ZIP Required: [illegible]

YOUR INTERNAL BILLING REFERENCE INFORMATION (optional) (First 24 characters will appear on invoice.): 04 11 02

H IF HOLD FOR PICK-UP, Print FEDEX Address Here
Street Address
City | State | ZIP Required

3 PAYMENT
1 [X] Bill Sender Acct No. Req'd
2 [ ] Bill Recipient's FedEx Acct. No. Fill in Account Number below
3 [ ] Bill 3rd Party FedEx Acct. No Fill in Account Number below (req'd)
4 [ ] Bill Credit Card Fill in Credit Card No. below (req'd)
5 [ ] Cash/Check
Acct./Credit Card No. _____ Exp. Date _____

4 SERVICES (Check only one box)

Priority Overnight (Delivery by next business morning†)	Standard Overnight (Delivery by next business afternoon†)
11 [X] YOUR PACKAGING	51 [ ] YOUR PACKAGING
16 [ ] FEDEX LETTER *	56 [ ] FEDEX LETTER *
12 [ ] FEDEX PAK *	52 [ ] FEDEX PAK *
13 [ ] FEDEX BOX	53 [ ] FEDEX BOX
14 [ ] FEDEX TUBE	54 [ ] FEDEX TUBE
Economy Two-Day (Delivery by second business day†)	**Government Overnight** (Restricted for authorized users only)
30 [ ] ECONOMY	46 [ ] GOVT LETTER
	41 [ ] GOVT PACKAGE

Freight Service (for Extra Large or any package over 150 lbs.)
70 [ ] OVERNIGHT FREIGHT ** (Confirmed reservation required)
80 [ ] TWO-DAY FREIGHT **

† Delivery commitment may be later in some areas
*Declared Value Limit $100
**Call for delivery schedule

5 DELIVERY AND SPECIAL HANDLING (Check services required)
1 [ ] HOLD FOR PICK-UP (Fill in Box H)
2 [X] DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) (Not available to all locations) [ ]
4 [ ] DANGEROUS GOODS (Extra charge)
5 [ ]
6 [ ] DRY ICE _____ Lbs
7 [ ] OTHER SPECIAL SERVICE _____
8 [ ]
9 [ ] SATURDAY PICK-UP (Extra charge)
10 [ ]
11 [ ] DESCRIPTION
12 [ ] HOLIDAY DELIVERY (If offered) (Extra charge)

6

PACKAGES	WEIGHT In Pounds Only	YOUR DECLARED VALUE (See right)
1	14	[illegible]
Total 1	Total 14	Total [illegible]

DIM SHIPMENT (Chargeable Weight)
[ ] _____ lbs.
___ x ___ x ___ = ___

Received At
1 [ ] Regular Stop
2 [ ] On-Call Stop
3 [ ] Drop Box
4 [ ] B.S.C.
5 [ ] Station

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

Use of this airbill constitutes your agreement to the service conditions in our current Service Guide, available upon request. See back of sender's copy of this airbill for information. Service conditions may vary for Government Overnight Service. See U.S. Government Service Guide for details.

We will not be responsible for any claim in excess of $100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, and document your actual loss for a timely claim. Limitations found in the current Federal Express Service Guide apply. Your right to recover from Federal Express for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of $100 or the declared value specified to the left. Recovery cannot exceed actual documented loss. The maximum Declared Value for FedEx Letter and FedEx Pak packages is $100.00.

In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

7 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

FedEx Emp. No. | Date/Time

Federal Express Use
Base Charges
Declared Value Charge
Other 1
Other 2
Total Charges

REVISION DATE 6/91
PART #137205 GBFE
FORMAT #099

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QUESTIONS? CALL 800-238-5355 TOLL FREE.

AIRBILL PACKAGE 4196080372

4196080372

SENDER'S COPY
DROP OFF YOUR PACKAGE AND SAVE

1 SENDER'S FEDERAL EXPRESS ACCOUNT NUMBER: 0495-[illegible] | Date: 10-29-92

From (Your Name) Please Print: K[illegible] | Your Phone Number (Very Important): [illegible]

Company: [illegible] | Department/Floor No.: [illegible]

Street Address: 24975 [illegible]

City: Alb[illegible] | State: MI | ZIP Required: 4[illegible]

YOUR INTERNAL BILLING REFERENCE INFORMATION (optional) (First 24 characters will appear on invoice.): 6401102

3 PAYMENT: 1 [X] Bill Sender Acct. No. Req'd 2 [ ] Bill Recipient's FedEx Acct No Fill in Account Number below 3 [ ] Bill 3rd Party FedEx Acct No. Fill in Account Number below (req'd) 4 [ ] Bill C[illegible] Fill in [illegible] 5 [ ] Cash/Check Acct/Credit Card No. _____

4 SERVICES (Check only one box)

Priority Overnight (Delivery by next business morning†)	Standard Overnight (Delivery by next business afternoon†)
11 [X] YOUR PACKAGING	51 [ ] YOUR PACKAGING
16 [ ] FEDEX LETTER *	56 [ ] FEDEX LETTER *
12 [ ] FEDEX PAK *	52 [ ] FEDEX PAK *
13 [ ] FEDEX BOX	53 [ ] FEDEX BOX
14 [ ] FEDEX TUBE	54 [ ] FEDEX TUBE
Economy Two-Day (Delivery by second business day†)	**Government Overnight** (Restricted for authorized users only)
30 [ ] ECONOMY	46 [ ] GOVT LETTER
	41 [ ] GOVT PACKAGE

Freight Service (for Extra Large or any package over 150 lbs)
70 [ ] OVERNIGHT FREIGHT ** (Confirmed reservation required)
80 [ ] TWO-DAY FREIGHT **

† Delivery commitment may be later in some areas
*Declared Value Limit $100
**Call for delivery schedule.

5 DELIVERY AND SPECIAL HANDLING (Check services required)

1 [ ] HOLD FOR PICK-UP (Fill in Box H)
2 [X] DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) [ ] (Not available to all locations)
4 [ ] DANGEROUS GOODS (Extra charge)
5 [ ]
6 [ ] DRY ICE _____ Lbs
7 [ ] OTHER SPECIAL SERVICE _____
8 [ ]
9 [ ] SATURDAY PICK-UP (Extra charge)
10 [ ]
11 [ ] DESCRIPTION
12 [ ] HOLIDAY DELIVERY (If offered) (Extra charge)

6 PACKAGES | WEI[illegible] In Po[illegible] On[illegible]
Total | Total

DIM SHIPMENT (Cha[illegible]) [ ] X X

Receiv[illegible]
1 [ ] Regular Stop
2 [ ] On-Call Stop

FEDERAL EXPRESS

MULTIPLE PACKAGE SHIPMENT LABELS

SHIPMENT DATE: 10-29-92
MASTER AIRBILL NUMBER: 4196080372

2 OF 2 — 6676410964
DESCRIPTION _____

OF — 6676410973
DESCRIPTION _____

OF — 6676410982
DESCRIPTION _____

OF — 6676410991
DESCRIPTION _____

OF — 6676411007
DESCRIPTION _____

Y

Recipient's Phone Number (Very Important): [illegible]

Department/Floor No.: [illegible]

ZIP Required: 14[illegible]25

IP Required

Federal Express Use
Base Charges
Declared Value Charge
Other 1
Other 2
Total Charges

REVISION DATE 6/91
PART #137205 GBFE
FORMAT #099

099

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SENDER'S COPY FORMAT #073
WCS 0792

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QUESTIONS? CALL 800-238-5355 TOLL FREE.

AIRBILL PACKAGE TRACKING NUMBER 4196080361

4196080361

SENDER'S COPY

SENDER'S COPY
DROP OFF YOUR PACKAGE AND SAVE

1 SENDER'S FEDERAL EXPRESS ACCOUNT NUMBER: 0495-[illegible] | Date: 10-[illegible]

From (Your Name) Please Print: [illegible] | Your Phone Number (Very Important): [illegible]

Company: [illegible] | Department/Floor No.:

Street Address: 27775 [illegible]

City: [illegible] | State: ME | ZIP Required: 47224

2 To (Recipient's Name) Please Print: [illegible] | Recipient's Phone Number (Very Important): (703) [illegible]

Company: ET [illegible] | Department/Floor No.:

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.): 1401 [illegible]

City: Roanoke | State: VA | ZIP Required: 24012

YOUR INTERNAL BILLING REFERENCE INFORMATION (optional) (First 24 characters will appear on invoice.): [illegible]

H IF HOLD FOR PICK-UP, Print FEDEX Address Here
Street Address:
City: | State: | ZIP Required:

3 PAYMENT
1 [X] Bill Sender Acct. No. Req'd
2 [ ] Bill Recipient's FedEx Acct. No. Fill in Account Number below
3 [ ] Bill 3rd Party FedEx Acct. No. Fill in Account Number below (req'd)
4 [ ] Bill Credit Card Fill in Credit Card No. below (req'd)
5 [ ] Cash/Check
Acct./Credit Card No. _____ Exp. Date ___/___

4 SERVICES (Check only one box)

Priority Overnight (Delivery by next business morning†)	Standard Overnight (Delivery by next business afternoon†)
11 [X] YOUR PACKAGING	51 [ ] YOUR PACKAGING
16 [ ] FEDEX LETTER *	56 [ ] FEDEX LETTER *
12 [ ] FEDEX PAK *	52 [ ] FEDEX PAK *
13 [ ] FEDEX BOX	53 [ ] FEDEX BOX
14 [ ] FEDEX TUBE	54 [ ] FEDEX TUBE
Economy Two-Day (Delivery by second business day†)	**Government Overnight** (Restricted for authorized users only)
30 [ ] ECONOMY	46 [ ] GOVT LETTER
	41 [ ] GOVT PACKAGE

Freight Service (for Extra Large or any package over 150 lbs.)
70 [ ] OVERNIGHT FREIGHT ** (Confirmed reservation required)
80 [ ] TWO-DAY FREIGHT **

† Delivery commitment may be later in some areas
*Declared Value Limit $100.
**Call for delivery schedule

5 DELIVERY AND SPECIAL HANDLING (Check services required)
1 [ ] HOLD FOR PICK-UP (Fill in Box H)
2 [X] DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) (Not available to all locations) [ ]
4 [ ] DANGEROUS GOODS (Extra charge)
5 [ ]
6 [ ] DRY ICE _____ Lbs
7 [ ] OTHER SPECIAL SERVICE _____
8 [ ]
9 [ ] SATURDAY PICK-UP (Extra charge)
10 [ ]
11 [ ] DESCRIPTION
12 [ ] HOLIDAY DELIVERY (If offered) (Extra charge)

6

PACKAGES	WEIGHT In Pounds Only	YOUR DECLARED VALUE (See right)
1	[illegible]	[illegible]
1	[illegible]	[illegible]
Total	Total	Total
[illegible]	[illegible]	[illegible]

DIM SHIPMENT (Chargeable Weight)
[ ] _____ lbs.
[illegible] x [illegible] x [illegible] = _____

Received At
1 [ ] Regular Stop
2 [ ] On-Call Stop
3 [ ] Drop Box
4 [ ] BSC
5 [ ] Station

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

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In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

7 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

FedEx Emp. No. | Date/Time

Federal Express Use
Base Charges
Declared Value Charge
Other 1
Other 2
Total Charges

REVISION DATE 6/91
PART #137205 GBFE
FORMAT #099

099

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FEDERAL EXPRESS

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QUESTIONS? CALL 800-238-5355 TOLL FREE.

AIRBILL PACKAGE TRACKING NUMBER 4196080350

4196080350

SENDER'S COPY

SENDER'S COPY
DROP OFF YOUR PACKAGE AND SAVE

1 SENDER'S FEDERAL EXPRESS ACCOUNT NUMBER: 0495 [illegible] | Date: 10-29-92

From (Your Name) Please Print: [illegible] | Your Phone Number (Very Important): [illegible]

Company: [illegible] | Department/Floor No.:

Street Address: [illegible]

City: [illegible] | State: MI | ZIP Required: [illegible]

2 To (Recipient's Name) Please Print: Missy Hamby | Recipient's Phone Number (Very Important): [illegible]

Company: [illegible] | Department/Floor No.:

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.): 1700 [illegible] Albany

City: [illegible] | State: OK | ZIP Required: 74012

YOUR INTERNAL BILLING REFERENCE INFORMATION (optional) (First 24 characters will appear on invoice.): 0401 [illegible]

H IF HOLD FOR PICK-UP, Print FEDEX Address Here
Street Address:
City: | State: | ZIP Required:

3 PAYMENT
1 [X] Bill Sender Acct. No Req'd.
2 [ ] Bill Recipient's FedEx Acct No Fill in Account Number below
3 [ ] Bill 3rd Party FedEx Acct No. Fill in Account Number below (req'd)
4 [ ] Bill Credit Card Fill in Credit Card No below (req'd)
5 [ ] Cash/Check
Acct /Credit Card No. _____ Exp. Date _____

4 SERVICES (Check only one box)

Priority Overnight (Delivery by next business morning†)	Standard Overnight (Delivery by next business afternoon†)
11 [X] YOUR PACKAGING	51 [ ] YOUR PACKAGING
16 [ ] FEDEX LETTER *	56 [ ] FEDEX LETTER *
12 [ ] FEDEX PAK *	52 [ ] FEDEX PAK *
13 [ ] FEDEX BOX	53 [ ] FEDEX BOX
14 [ ] FEDEX TUBE	54 [ ] FEDEX TUBE

Economy Two-Day (Delivery by second business day†)	Government Overnight (Restricted for authorized users only)
30 [ ] ECONOMY	46 [ ] GOVT LETTER
	41 [ ] GOVT PACKAGE

Freight Service (for Extra Large or any package over 150 lbs.)
70 [ ] OVERNIGHT FREIGHT ** (Confirmed reservation required)
80 [ ] TWO-DAY FREIGHT **

† Delivery commitment may be later in some areas.
*Declared Value Limit $100
**Call for delivery schedule

5 DELIVERY AND SPECIAL HANDLING (Check services required)
1 [ ] HOLD FOR PICK-UP (Fill in Box H)
2 [X] DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) (Not available to all locations) [ ]
4 [ ] DANGEROUS GOODS (Extra charge)
5 [ ]
6 [ ] DRY ICE _____ Lbs
7 [ ] OTHER SPECIAL SERVICE _____
8 [ ]
9 [ ] SATURDAY PICK-UP (Extra charge)
10 [ ]
11 [ ] DESCRIPTION
12 [ ] HOLIDAY DELIVERY (If offered) (Extra charge)

6

PACKAGES	WEIGHT In Pounds Only	YOUR DECLARED VALUE (See right)
6	[illegible]	9,000
Total 6	Total [illegible]	Total 9,000

DIM SHIPMENT (Chargeable Weight)
[ ] _____ lbs.
___ x ___ x ___ = ___

Received At
1 [ ] Regular Stop
2 [X] On-Call Stop
3 [ ] Drop Box
4 [ ] B.S.C.
5 [ ] Station

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FORMAT #099

099

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Res wells Sampled 10-27-92 Sampled 10-28-92 Sampled 10-29-92

Case #	Sample #	Sample Date	Sample Time	OTR #	ITR #	SAS# 7525 E-	Analyzed For	Tag #	LOT # ~~Bottles~~
19063	AL-RW01-101	10-27-92	1320	EMC-25			VOA	150837-840	
7597E-01							BNA, pest PCB	150841-844	
7581E-01	ms/msD				MELX-15		metals	150845-846	
							Cyanide	150847-848	
							mercury	150849-850	
						E-67	Chloride/Sulfate	150851, 852	
							Nitrite/Ammonia	150853, 854	
19063	AL-RW02-101	10-27-92	1420	EMC-24			VOA	150855-858	
7597E-01							BNA, pest	150859-862	
7581E-01					MELX-14		m	150863	
							C	150864	
							merc.	150865	
						E-68	Chloride/Sulfate	150866	
							Nitrite/Ammonia	150867	
19063	AL-RW03-101	10-27-92	1640	EMC-23			VOA	150868-871	
7597E-01				"			BNA, pest	150871-875	
7581E-01					MELZ-21		m	150876	
					"		C	150877	
					"		merc.	150878	
						E-69	Chloride/Sulfate	150879	
						"	Nitrite/Ammonia	150880	
19063	AL-RW04-101	10-27-92	1520	EMC-22			VOA	150881-884	
7597E-01				"			BNA, pest	150885-888	
7581E-01					MELZ-22		m	150889	
					"		C	150890	
					"		merc.	150891	
						E-70	Chloride/Sulfate	150892	
						"	Nitrite/Ammonia	150893	

Res Well

Case #	Sample #	Sample Date	Sample Time	OTR #	ITR #	SAS# 7525E-	Analyzed For	Tag #	LOT # ~~Bottles~~
19063	AL·RW05·101	10·27·92	1540	EMC-21			VOA	150894-897	
7597E-01				"			BNA, Pest. PCB	150898-901	
7581E-01					MEL2-23		m	150902	
					"		Cy	150903	
							Merc.	150904	
						E-71	Chloride/Sulfate	150905	
							Nitrite/Ammonia	150906	
19063	AL·RW01·ITB	10·27·92	900	EMB-05			VOA	150963, 964	
7597E-01	AL·RW06·ITB	10·28·92	800	EMB-14			VOA	150961, 962	
19063	AL·RW06·101	10·28·92	1620	EMC-20			VOA	150907-911	
7597E-01				"			BNA, Pest. PCB	150912-915	
7581E-01					MEL2-24		m	150916	
					"		Cy	150917	
							Merc.	150918	
						E-72	Chloride/Sulfate	150919	
							Nitrite/Ammonia	150920	
19063	AL·RW06·IDP	10·28·92	1620	EMC-19			VOA	150921-924	
7597E-01							BNA, Pest. PCB	150925-928	
7581E-01					MEL2-25		m	150929	
							Cy	150930	
							Merc.	150931	
						E-73	Chloride/Sulfate	150932	
							Nitrite/Sulfate	150933	

Res Well

Case #	Sample #	Sample Date	Sample Time	OTR #	ITR #	SAS#	Analyzed For	Tag #	LOT # ~~Bottles~~
19063	AL·RW07·101	10·28·92	1335	EMC-18			VOA	150934-937	
7597E-01				"			BNA, Pest, PCB	150938-941	
7581E-01					MELZ-26		M	150942	
							Cy	150943	
							Merc.	150944	
						E-74	Chloride/sulfate	150945	
							Nitrite/Ammonia	150946	
19063	AL·RW08·101	10·28·92	1515	EMC-17			VOA	150947-950	
7597E-01				"			BNA, Pest, PCB	150976-979	
7581E-01					MELZ-27		M	150980	
							Cy	150981	
							Merc.	150982	
						E-75	Chloride/Sulfate	150983	
							Nitrite/Ammonia	150984	
19063	AL·RW09·101	10·28·92	1425	EMC-16			VOA	150985-988	
7597E-01							BNA, Pest. PCB	150989-992	
7581E-01					MELZ-28		M	150993	
							Cy	150994	
							Merc.	150995	
						E-76	Chloride/Sulfate	150997	
							Nitrite/Ammonia	150996	
19063	AL·RW10·101	10·28·92	1350	EMC-15			VOA	150998-999	150951 150 1000
7597E-01							BNA, Pest. PCB	150952-955	
7581E-01					MELZ-29		M	150956	
							Cy	150957	
							Merc.	150958	
						E-	Chloride/Sulfate	150959	
							Nitrite/Ammonia	150960	
19063	AL·RW10·MB	10.29.92	1100	EMA-06			VOA	150965, 966	
7597E-01									

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United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Special Analytical Service

Packing List/Chain of Custody

SAS No. 7525E

1. Project Code: 9321H11	Account Code: —	2. Region No.: V	Sampling Co.: Wil Eng. & Sci.	4. Date Shipped: 10/29/92	Carrier: Fed EX
Regional Information: TFA 102		Sampler (Name): K. Osterman		Airbill Number: 4196080372	
Non-Superfund Program: —		Sampler Signature: K. Osterman		5. Ship To: Ecology & Envirn. 4285 Genesee St. Buffalo, NY 14225 ATTN: Barb Krajewski	
Site Name: Albion Landfill		3. Type of Activity: SF, PRP, ST, FED; Lead, Pre-Remedial, PA, SSI, LSI; Remedial: RIFS (X), RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST			
City, State: Albion MI	Site Spill ID: AN				

6. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil
7. Waste
8. Other (Specify)

7. Preservative (Enter in Column C)
1. HCl
2. HNO3
3. $NAHSO_4$
4. H_2SO_4
5. NAOH
6. Other (SAS) (Specify)
7. Ice only
N. Not preserved

Sample Numbers 7525E-	A Matrix Enter from Box 6	B Conc Low Med High	C Preserv-ative Used from Box 7	D Analysis	E Sample used for spike and/or duplicate	F Regional Specific Tracking Number or Tag Number	G Station Location Identifier	H Mo/Day/Year/Time Sample Collection 1992	I Sampler Initials	J Designated Field QC
1. E-67	2	L	7	Chloride/Sulfate	✓	150851, 852	RW01	10/27 1320	K.O.	
2. E-68	2	L	7	" "	(D) 10-27-92	150866	RW02	10/27 1420	K.O.	
3. E-69	2	L	7	" "		150879	RW03	10/27 1640	K.O.	
4. E-70	2	L	7	" "		150892	RW04	10/27 1520	K.O.	
5. E-71	2	L	7	" "		150905	RW05	10/27 1540	K.O.	
6. E-67	2	L	4	Nitrite/Nitrate/Ammonia	✓	150853, 854	RW01	10/27 1320	K.O.	
7. E-68	2	L	4	" " "		150867	RW02	10/27 1420	K.O.	
8. E-69	2	L	4	" " "		150880	RW03	10/27 1640	K.O.	
9. E-70	2	L	4	" " "		150893	RW04	10/27 1520	K.O.	
10. E-71	2	L	4	" " "		150906	RW05	10/27 1540	K.O.	

Shipment for SAS complete? (Y/N) Y

COC 169217
169218

CHAIN OF CUSTODY RECORD cooler 1 of 2

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Kurt T. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Received by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples ☐ Accepted (Signature)
☐ Declined

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Special Analytical Service

Packing List/Chain of Custody

SAS No. 7525E-

1. Project Code: 9321411	Account Code: —	2. Region No.: V	Sampling Co.: WW Eng. & Sci	4. Date Shipped: 10/29/92	Carrier: Fed Ex
Regional Information: TFA 102		Sampler (Name): K. Osterman		Airbill Number: 4196080372	
Non-Superfund Program		Sampler Signature: K. Osterman		5. Ship To: Ecology + Env. 4285 Genesee St. Buffalo, NY 14225 ATTN: Bob Krajewski	
Site Name: Albion Landfill		3. Type of Activity: Lead / Pre-Remedial / Remedial / Removal			
City, State: Albion MI.	Site Spill ID: AN	SF / PRP / ST / FED; PA / SSI / LSI; RIFS / RD / RA / O&M / NPLD; CLEM / REMA / REM / OIL / UST			

6. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil
7. Waste
8. Other (Specify)

7. Preservative (Enter in Column C)
1. HCl
2. HNO_3
3. $NAHSO_4$
4. H_2SO_4
5. NAOH
6. Other (SAS) (Specify)
7. Ice only
N. Not preserved

Sample Numbers 7525E	A Matrix Enter from Box 6	B Conc Low Med High	C Preservative Used from Box 7	D Analysis	E Sample used for spike and/or duplicate	F Regional Specific Tracking Number or Tag Number	G Station Location Identifier	H Mo/Day/Year/Time Sample Collection 1992	I Sampler Initials	J Designated Field QC
1. E-72	2	L	7	Chloride/Sulfate		150919	RW06	10/28 1620	K.O.	
2. E-73	2	L	7	" "	✓	150932	RW06	10/28 1620	K.O.	
3. E-74	2	L	7	" "		150945	RW07	10/28 1335	K.O.	
4. E-72	2	L	4	Nitrite/Nitrate/Ammonia		150920	RW06	10/28 1620	K.O.	
5. E-73	2	L	4	" " "	✓	150933	RW06	10/28 1620	K.O.	
6. E-74	2	L	4	" " "		150945	RW07	10/28 1335	K.O.	
7.										
8.										
9.										
10.										

Shipment for SAS complete? (Y/N) Y

COC 169217
169218

CHAIN OF CUSTODY RECORD Cooler 1 of 2

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Received by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples ☐ Accepted (Signature)
☐ Declined

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Organic Traffic Report & Chain of Custody Record

(For Organic CLP Analysis)

SAS No. (if applicable): 7597E-01

Case No.: 19063

1. Project Code: 9132H11
Account Code: —
2. Region No.: II
Sampling Co.: WWEng. & Sci
4. Date Shipped: 10-29-92
Carrier: Fed EX

Regional Information: TFA 102
Sampler (Name): K. Osterman
Airbill Number: 4196080350

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: American Analytical & Tech. Serv. 1700 West Albany Broken Arrow, OK 74012 ATTN: Missy Hamby

Site Name: Albion Landfill
3. Type of Activity: Lead: SF, PRP, ST, FED; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS, RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST
City, State: Albion MT.
Site Spill ID: AN

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. $NaHSO_4$ 4. H_2SO_4 5. Other (Specify) 6. Ice only N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) EMC-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E RAS Analysis: VOA	BNA	Pest/ PCB	High only ARO/ TOX	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Inorg. Samp. No. MELX	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
25	2	L	G	1	X				150837-840	RW01	10/27 1320	K.O.	-15	
24	2	L	G	1	X				150855-858	RW02	10/27 1420	K.O.	-14	
23	2	L	G	1	X				150868-871	RW03	10/27 1640	K.O.	MELX-21	
22	2	L	G	1	X				150881-884	RW04	10/27 1520	K.O.	-22	
21	2	L	G	1	X				150894-897	RW05	10/27 1540	K.O.	-23	
"	2	L	G	1		X	X		150898-901	RW05	" "	K.O.	"	
-20	2	L	G	1	X				150907-911	RW06	10/28 1620	K.O.	-24	
-19	2	L	G	1	X				150921-924	RW06	10/28 1620	K.O.	-25	Duplicate
-18	2	L	G	1	X				150934-937	RW07	10/28 1335	K.O.	-26	
-17	2	L	G	1	X				150947-950	RW08	10/28 1515	K.O.	-27	

Shipment for Case complete? (Y/N): Y
Page 1 of 2
Sample used for a spike and/or duplicate: 1
Additional Sampler Signatures: P. Fisher
Chain of Custody Seal Number: 169201, 169202

Cooler 1 of 2

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples: ☐ Accepted (Signature) ☐ Declined

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Organic Traffic Report & Chain of Custody Record
(For Organic CLP Analysis)

SAS No. (if applicable): 7597E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: —
2. Region No.: V
Sampling Co.: WW Eng & Sci
4. Date Shipped: 10/29/92
Carrier: Fed EX

Regional Information: TFA102
Sampler (Name): K. Osterman
Airbill Number: 4196080350

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: American Analytical & Tech. Serv. 1700 West Albany Broken Arrow, OK 74012
ATTN: Missy Namby

Site Name: Albion Landfill
3. Type of Activity: Lead: SF, PRP, ST, FED; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS, RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST
City, State: Albion MI.
Site Spill ID: AN

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaHSO4 4. H2SO4 5. Other (Specify) 6. Ice only N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) EMC-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E RAS Analysis: VOA	BNA	Pest/ PCB	High only ARO/ TOX	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection	I Sampler Initials	J Corresp. CLP Inorg. Samp. No. MELZ	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-16	2	L	G	1	X				150985-988	RW09 ~~1425~~	10/28 1425	K.O	-28	
~~-15~~	~~2~~	~~L~~	~~G~~	~~1~~	~~X~~				~~150998-999~~	~~RW10 1350~~	~~10/28 1350~~	~~K.O~~	~~-29~~	
—	—	—	—	—	—				150951, 150000	—	—			
EMB-05	8	L	G	1	X				150963,964	RW01	10/27 900	K.O.	—	Trip Blank
EMC-06	8	L	G	1	X				150961,962	RW06	10/28 800	K.O.	—	Trip Blank

10-29-92

Shipment for Case complete? (Y/N): Y
Page 1 of 2
Sample used for a spike and/or duplicate:
Additional Sampler Signatures: P. Fisher
Chain of Custody Seal Number: 169201, 169202

Cooler 1 of 6

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples: ☐ Accepted (Signature) ☐ Declined

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Organic Traffic Report & Chain of Custody Record

(For Organic CLP Analysis)

SAS No. (if applicable): 7597E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: —
2. Region No.: V
Sampling Co.: WW Eng + Sci
4. Date Shipped: 10
Carrier: Fed Ex

Regional Information: TFA 102
Sampler (Name): K. Osterman
Airbill Number: 4196080350

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: American Analytical Tech. Serv. 1700 West Albany Broken Arrow, OK 74012 ATTN: Missy Hamby

Site Name: Albion Landfill
3. Type of Activity: Lead: SF, PRP, ST, FED; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS ☒, RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST
City, State: Albion MI.
Site Spill ID: AN

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. $NaHSO_4$ 4. H_2SO_4 5. Other (Specify) 6. Ice only N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) FMC-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E RAS Analysis VOA	BNA	Pest/ PCB	High only ARO/ TOX	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Inorg. Samp. No. MELX-	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-25	2	L	G	6		X	X		150841-844	RW01	10/27 1320	K.O.	-15	
-25	2	L	G	6		X	X		150859-862	RW02	10/27 1420	K.O.	-14	

Shipment for Case complete? (Y/N): (Y)
Page 1 of 1
Sample used for a spike and/or duplicate: ~~FMC 25~~ 10-28-92
Additional Sampler Signatures: Patricia A. Fisher
Chain of Custody Seal Number: 169203, 169204

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/28/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples ☐ Accepted (Signature) ☐ Declined

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Organic Traffic Report & Chain of Custody Record

(For Organic CLP Analysis)

SAS No. (if applicable): 7597E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: —
2. Region No.: V
Sampling Co.: WW Eng. & Sci
4. Date Shipped: 10/29/92
Carrier: Fed EX

Regional Information: TFA 102
Sampler (Name): K. Osterman
Airbill Number: 4196080350

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: American Analytical & Technical, 1700 West Albany Suite A, Broken Arrow, OK 74012
ATTN: Missy Hamby

Site Name: Albion Landfill
City, State: Albion, MI.
Site Spill ID: AN

3. Type of Activity:
Lead: SF, PRP, ST, FED
Pre-Remedial: PA, SSI, LSI
Remedial: RIFS, RD, RA, O&M, NPLD
Removal: CLEM, REMA, REM, OIL, UST

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaHSO4 4. H2SO4 5. Other (Specify) 6. Ice only N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) EMC-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E RAS Analysis VOA	BNA	Pest/ PCB	High only ARO/ TOX	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Inorg. Samp. No. MEL2	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-23	2	L	G	6		X	X		150871-875	RW03	10/27 1640	K.O	-21	
-22	2	L	G	6		X	X		150881-884	RW04	10/27 1520	K.O.	-22	

Shipment for Case complete? (Y/N): Y
Page 1 of 1
Sample used for a spike and/or duplicate
Additional Sampler Signatures: Patricia A. Fisher
Chain of Custody Seal Number: 169205, 169206

Cooler 3 of 6

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples: ☐ Accepted (Signature) ☐ Declined

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Org-1

0344838

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report & Chain of Custody Record

(For Organic CLP Analysis)

SAS No. (if applicable): 7597E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: —
2. Region No.: V
Sampling Co.: WWEng&Sci
4. Date Shipped: 10-29-92
Carrier: Fed Ex

Regional Information: TFA-102
Sampler (Name): K. Osterman
Airbill Number: 4196080350

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: American Analytical & Technical, 1700 West Albany, Suite A, Broken Arrow, OK 74012, ATTN: Missy Hamby

Site Name: Albion Landfill
3. Type of Activity: Lead: SF, PRP, ST, FED; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS ☒, RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST

City, State: Albion MF
Site Spill ID: AN

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaHSO4 4. H2SO4 5. Other (Specify) 6. Ice only N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) EMC-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E RAS Analysis: VOA	BNA	Pest/ PCB	High only ARO/ TOX	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Inorg. Samp. No. MELZ-	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-20	2	L	G	6		X	X		150912-915	RW06	10/28 1620	K.O.	-24	
-19	2	L	G	6		X	X		150925-928	RW07	10/28 1620	K.O.	-25	Duplicate

Shipment for Case complete? (Y/N): Y
Page 1 of 1
Sample used for a spike and/or duplicate:
Additional Sampler Signatures: Patricia A. Fisher
Chain of Custody Seal Number: 169207, 169208 Cooler 4 of 6

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks: Is custody seal intact? Y/N/none	

Split Samples: ☐ Accepted (Signature) ☐ Declined

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EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report & Chain of Custody Record

(For Organic CLP Analysis)

SAS No. (if applicable): 7597E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: 10-28-92
2. Region No.: V
Sampling Co.: WW Eng. & Sci
4. Date Shipped: 10-29-92
Carrier: Fed EX

Regional Information: TFA 102
Sampler (Name): K. Osterman
Airbill Number: 4196080350

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: American Analytical + Technical, 1700 West Albany, Suite A, Broken Arrow, OK 74012
ATTN: Missy Hamby

Site Name: Albion Landfill
3. Type of Activity: SF, PRP, ST, FED; Lead; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS (X), RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST

City, State: Albion MI.
Site Spill ID: AN

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaHSO4 4. H2SO4 5. Other (Specify) 6. Ice only N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) EMC	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E RAS Analysis: VOA	BNA	Pest/ PCB	High only ARO/ TOX	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Inorg. Samp. No. MELZ	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-18	2	L	G	6		X	X		150938-941	RW07	10/28 1335	K.O.	-26	
-17	2	L	G	6		X	X		150947-950	RW08	10/28 1515	K.O.	-27	

Shipment for Case complete? (Y/N): Y
Page 1 of 1
Sample used for a spike and/or duplicate:
Additional Sampler Signatures:
Chain of Custody Seal Number: 169209, 169210

CHAIN OF CUSTODY RECORD

Cooler 5 of 6

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks: Is custody seal intact? Y/N/none	

Split Samples: ☐ Accepted (Signature) ☐ Declined

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O344840

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PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report & Chain of Custody Record

(For Organic CLP Analysis)

SAS No. (if applicable): 7597E-01

Case No.: 19063

1. Project Code	Account Code	2. Region No.	Sampling Co.	4. Date Shipped	Carrier
932H11	—	II	WW Eng & Sci	10-29-92	Fed EX

Regional Information: TFA102

Sampler (Name): K. Osterman

Airbill Number: 4196080350

Non-Superfund Program: —

Sampler Signature: K. Osterman

Site Name: Albion Landfill

City/State: Albion MI

Site Spill ID: AN

3. Type of Activity: Lead / Pre-Remedial / Remedial / Removal

SF		RIFS	X	CLEM	
PRP		RD		REMA	
ST		RA		REM	
FED		O&M		OIL	
		NPLD		UST	

PA / SSI / LSI

5. Ship To: American Analytical & Tech. Ser. 1700 West Albany, Suite A Broken Arrow, OK 74012

ATTN: Missy Hamby

6. Preservative (Enter in Column D)
1. HCl
2. HNO3
3. $NaHSO_4$
4. H_2SO_4
5. Other (Specify)
6. Ice only
N. Not preserved

7. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (High only)
7. Waste (High only)
8. Other (Specify)

CLP Sample Numbers (from labels) EMC-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./Grab	D Preservative from Box 6	E RAS Analysis VOA	BNA	Pest/PCB	High only ARO/TOX	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Inorg. Samp. No. MELZ	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-16	2	L	G	6		X	X		150989-992	RW09	10/28 1425	K.O.	-28	
-15	2	L	G	6		X	X		150952-955	RW10	10/29 1350	K.O.	-29	
EMA-06	8	L	G	1	X				150965-966	RW10	10/29 1100	K.O.	—	Trip Blank
EMC-15	2	L	G	1	X				150998-999	RW10	10/29 1350	K.O.	—	
—	—	—	—	—	—				150951 151000	RW10	10/29 1350	K.O.	-29	

Shipment for Case complete? (Y/N): Y

Page 1 of 1

Sample used for a spike and/or duplicate:

Additional Sampler Signatures: Patricia A. Fisher

Chain of Custody Seal Number: 169211, 169212

Cooler 6 of 6

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples ☐ Accepted (Signature) ☐ Declined

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PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Inorganic Traffic Report & Chain of Custody Record

(For Inorganic CLP Analysis)

SAS No. (if applicable): 7581E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: —
2. Region No.: IV
Sampling Co.: WW Eng & Sci
4. Date Shipped: 10/29/92
Carrier: Fed Ex

Regional Information: TFA 102
Sampler (Name): K. Osterman
Airbill Number: 4196080361

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: ETS Anaytical Services, 1401 Municipal Rd. N.W., Roanoke, VA. 24012, ATTN: Susan Sheppard

Site Name: Albion Landfill
City, State: Albion ME
Site Spill ID: AN

3. Type of Activity: Lead: SF, PRP, ST, FED; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS [X], RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaOH 4. H_2SO_4 5. $K_2CR_2O_7$ 6. Ice only 7. Other (Specify) N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) MELX-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E - RAS Analysis: Metals: Total	Metals: Dissolved Metals	Cyanide	Low Conc. only: Nitrate/ Nitrite	Low Conc. only: Fluoride	High only: pH	High only: Conductivity	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Org. Samp. No. EMC-	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
15	2	L	G	2	X							150845-846	RW01	10/27 1320	K.O.	25	
15	2	L	G	3			X					150847-848	RW02	10/27 1320	K.O.	25	
15	2	L	G	5+2		X						150849-850	RW01	10/27 1320	K.O.	25	
14	2	L	G	2	X							150863	RW02	10/27 1420	K.O.	24	
14	2	L	G	3			X					150864	RW02	10/27 1420	K.O.	24	
14	2	L	G	2+5		X						150865	RW02	10/27 1420	K.O.	24	
MELZ-21	2	L	G	2	X							150876	RW03	10/27 1640	K.O.	-23	
21	2	L	G	3			X					150877	RW03	10/27 1640	K.O	-23	
21	2	L	G	2+5		X						150878	RW03	10/27 1640	K.O	-23	

Shipment for Case complete? (Y/N): Y
Page 1 of 2
Sample used for a spike and/or duplicate: MELX-15
Additional Sampler Signatures: Patricia A. Fisher
Chain of Custody Seal Number: 169213, 169214
Cooler 1 of 2

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples: [ ] Accepted (Signature) [ ] Declined

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Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Inorganic Traffic Report & Chain of Custody Record

(For Inorganic CLP Analysis)

SAS No. (if applicable): 7581E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: —
2. Region No.: V
Sampling Co.: WW Eng&Sci
4. Date Shipped: 10/29/92
Carrier: Fed EX

Regional Information: TFA-102
Sampler (Name): K. Osterman
Airbill Number: 4196080361

Non-Superfund Program
Sampler Signature: K. Osterman
5. Ship To: ETS Analytical Services, 1401 Municipal Rd N.W., Roanoke, VA 24012
ATTN: Susan Sheppard

Site Name: Albion Landfill
3. Type of Activity: Lead: SF, PRP, ST, FED; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS [X], RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST
City, State: Albion MI
Site Spill ID: AN

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaOH 4. H_2SO_4 5. $K_2CR_2O_7$ 6. Ice only 7. Other (Specify) N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) MELZ-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E - RAS Analysis: Metals Total	Metals Reserved	Cyanide	Low Conc. only: Nitrate/ Nitrite	Fluoride	High only: pH	Conductivity	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Org. Samp. No. EMC-	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
22	2	L	G		X							150889	RW04	10/27 1520	K.O.	22	
"	2	L	G				X					150890	"	" "	K.O.	"	
"	2	L	G			X						150891	"	" "	K.O.	"	
23	2	L	G		X							150902	RW05	10/27 1540	K.O.	23	
"	2	L	G				X					150903	RW05	" "	K.O.	23	
"	2	L	G			X						150904	"	" "	K.O.	23	

Shipment for Case complete? (Y/N): Y
Page ~~1~~ 2 of 2
Sample used for a spike and/or duplicate
Additional Sampler Signatures: Patricia A. Fisher
Chain of Custody Seal Number: 169213, 169214
Cooler 1 of 2

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples: [ ] Accepted (Signature) [ ] Declined

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I 344732

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United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Inorganic Traffic Report & Chain of Custody Record

(For Inorganic CLP Analysis)

SAS No. (if applicable): 7581E-01

Case No.: 19063

1. Project Code	Account Code	2. Region No.	Sampling Co.	4. Date Shipped	Carrier
932H11	—	IV	WW Eng & Sci	10-29-92	Fed Ex

Regional Information: TFA102

Sampler (Name): K. Osterman

Airbill Number: 419608361

Non-Superfund Program: —

Sampler Signature: K. Osterman

Site Name: Albion Landfill

City, State: Albion MI

Site Spill ID: AN

3. Type of Activity: Lead / Pre-Remedial / Remedial / Removal

SF, PRP, ST, FED, PA, SSI, LSI, RIFS, RD, RA, O&M, NPLD, CLEM, REMA, REM, OIL, UST

5. Ship To: ETS Analytical Services, 1401 Municipal Rd. N.W., Roanoke, VA. 24012

ATTN: Susan Sheppard

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaOH 4. H_2SO_4 5. $K_2CR_2O_7$ 6. Ice only 7. Other (Specify) N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) MELZ	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./Grab	D Preservative from Box 6	E - RAS Analysis: Metals Total	Metals Dissolved	Metals Cyanide	Low Conc. only Nitrate/Nitrite	Low Conc. only Fluoride	High only pH	High only Conductivity	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Org. Samp. No. EMC-	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-27	2	L	G	2	X							150980	RW08	10/28 1515	K.O.	17	
-27	"	"	"	3			X					150981	"	10/28 "	K.O.	17	
27	"	"	"	2,5		X						150982	"	10/28 "	K.O.	17	
-28	2	L	G	2	X							150993	RW09	10/28 1425	K.O.	16	
"	"	"	"	3			X					150994	"	10/28 "	K.O.	16	
"	"	"	"	2,5		X						150995	"	10/28 "	K.O.	16	
-29	2	L	G	2	X							150956	RW10	10/29 1350	K.O.	15	
"	"	"	"	3			X					150957	"	10/29 "	K.O.	15	
"	"	"	"	2,5		X						150958	"	10/29 "	K.O.	15	

Shipment for Case complete? (Y/N): Y

Page 1 of 2

Sample used for a spike and/or duplicate:

Additional Sampler Signatures: Patricia A. Fisher

Chain of Custody Seal Number: 169215, ~~169216~~ 169216 (12) 10-29-92

Cooler 2 of 2

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples: ☐ Accepted (Signature) ☐ Declined

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Inorg-1

344734

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United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Inorganic Traffic Report & Chain of Custody Record

(For Inorganic CLP Analysis)

SAS No. (if applicable): 7581E-01

Case No.: 19063

1. Project Code: 932H11
Account Code: —
2. Region No.: IV
Sampling Co.: WWEng & Sci
4. Date Shipped: 10/29/92
Carrier: Fed

Regional Information: TFA 102
Sampler (Name): K. Osterman
Airbill Number: 4196080361

Non-Superfund Program: —
Sampler Signature: K. Osterman
5. Ship To: ETS Analytical Services, 1401 Municipal Rd N.W., Roanoke, VA 24012, ATTN: Susan Sheppard

Site Name: Albion Landfill
City, State: Albion MI
Site Spill ID: AN

3. Type of Activity: Lead: SF, PRP, ST, FED; Pre-Remedial: PA, SSI, LSI; Remedial: RIFS, RD, RA, O&M, NPLD; Removal: CLEM, REMA, REM, OIL, UST

6. Preservative (Enter in Column D): 1. HCl 2. HNO3 3. NaOH 4. H_2SO_4 5. $K_2CR_2O_7$ 6. Ice only 7. Other (Specify) N. Not preserved

7. Sample Description (Enter in Column A): 1. Surface Water 2. Ground Water 3. Leachate 4. Rinsate 5. Soil/Sediment 6. Oil (High only) 7. Waste (High only) 8. Other (Specify)

CLP Sample Numbers (from labels) MELZ-	A Enter # from Box 7	B Conc. Low Med High	C Sample Type: Comp./ Grab	D Preservative from Box 6	E - RAS Analysis: Metals Total	Metals Dissolved	Cyanide	Low Conc. only: Nitrate/ Nitrite	Fluoride	High only: pH	Conductivity	F Regional Specific Tracking Number or Tag Numbers	G Station Location Number	H Mo/Day/ Year/Time Sample Collection 1992	I Sampler Initials	J Corresp. CLP Org. Samp. No. EMC- ~~MELZ-~~ 10-24-92	K Enter Appropriate Qualifier for Designated Field QC (B = Blank S = Spike D = Duplicate PE = Perform. Eval. — = Not a QC Sample)
-24	2	L	G	2,6	X							150916	RW06	10/28 1620	K.O.	-20	
"	2	L	G	3,6			X					150917	"	" "	K.O.	-20	
"	2	L	G	2,6,5		X						150918	"	" "	K.O	-20	
-19	2	L	G	2,6	X							150929	RW06	10/28 1620	K.O.	-19	Duplicate
"	2	L	G	3,6			X					150930	"	" "	K.O.	-19	"
"	2	L	G	2,5		X						150931	"	" "	K.O	-19	"
-26	2	L	G	2	X							150942	RW07	10/28 1335	K.O.	-18	
"	2	L	G	3			X					150943	RW07	" "	K.O	-18	
"	2	L	G	2,5		X						150944	"	" "	K.O.	-18	

Shipment for Case complete? (Y/N): Y
Page 1 of 2
Sample used for a spike and/or duplicate
Additional Sampler Signatures: Patricia A. Fisher
Chain of Custody Seal Number: 169215, 169216
Cooler 2 of 2

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples: ☐ Accepted (Signature) ☐ Declined

EPA Form 9110-1 (Rev. 5-91) Replaces EPA Form (2075-6), previous edition which may be used

DISTRIBUTION: Green - Region Copy Pink - SMO Copy White - Lab Copy for return to Region Yellow - Lab Copy for Return to SMO

SEE REVERSE FOR ADDITIONAL STANDARD INSTRUCTIONS

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EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Special Analytical Service

Packing List/Chain of Custody

SAS No. 7525E

1. Project Code: 932#11	Account Code: —	2. Region No.: V	Sampling Co.: WWEng. & Sci	4. Date Shipped: 10/29/92	Carrier: Fed Ex
Regional Information: TFA 102		Sampler (Name): K. Osterman		Airbill Number: 4196080372	
Non-Superfund Program: —		Sampler Signature: K. Osterman		5. Ship To: Ecology & Enviro. 4285 Genesee Buffalo, NY 14225 ATTN: Barb Krajewski	
Site Name: Albion Landfill		3. Type of Activity: SF, PRP, ST, FED; Lead: PA, SSI, LSI; Pre-Remedial: RIFS, RD, RA, O&M, NPLD; Remedial: CLEM, REMA, REM, OIL, UST; Removal: [X]			
City, State: Albion MI.	Site Spill ID: AN				

6. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil
7. Waste
8. Other (Specify)

7. Preservative (Enter in Column C)
1. HCl
2. HNO_3
3. $NAHSO_4$
4. H_2SO_4
5. NAOH
6. Other (SAS) (Specify)
7. Ice only
N. Not preserved

Sample Numbers	A Matrix Enter from Box 6	B Conc Low Med High	C Preservative Used from Box 7	D Analysis	E Sample used for spike and/or duplicate	F Regional Specific Tracking Number or Tag Number	G Station Location Identifier	H Mo/Day/Year/Time Sample Collection	I Sampler Initials	J Designated Field QC
7525E-						150983 10-28-92		1992		
1 E-75	2	L	7	Sulfate/Chloride		~~150984~~	RW08	10/28 1515	K.O.	
2. E-76	2	L	7	" "		150997	RW09	10/28 1425	K.O.	
3. E-77	2	L	7	" "		150959	RW10	10/29 1350	K.O.	
4 E-75	2	L	4	Nitrite/Nitrate/Ammonia		150984	RW08	10/28 1515	K.O.	
5. E-76	2	L	4	" " "		150996	RW09	10/28 1425	K.O.	
6. E-77	2	L	4	" " "		150960	RW10	10/29 1350	K.O.	
7.										
8.										
9.										
10.										

Shipment for SAS complete? (Y/N) N

CoC # 169219
169220

CHAIN OF CUSTODY RECORD

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
K. Osterman	10/29/92 1200				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Received by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Is custody seal intact? Y/N/none	

Split Samples ☐ Accepted (Signature)
☐ Declined

EPA Form

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S 26593

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DESCRIPTION

4 OF 6 | 667 | 6410 | 937

DESCRIPTION

5 OF 6 | 667 | 6410 | 946

DESCRIPTION

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DESCRIPTION

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DESCRIPTION