

# Sherwood Charter School

## 2023 Lead in Drinking Water Testing and Results

### SHERWOOD CHARTER SCHOOL

### SAFETY COMMITTEE

Principal Joy Raboli

Parent Volunteer – Joe Whitehead

## Sherwood Charter School

### 2023 Lead in Drinking Water Testing Plan and Results

Oregon schools are required every six years to test for lead content in drinking water. Any water source that has lead concentration of 15 parts per billion (ppb) or higher must be remedied. Tests must be conducted with the “first draw” method, meaning after a six hour period of non-use and the analysis must be conducted by a state approved laboratory. Links to the statutes and rules describing the testing requirements are listed at the end of this report, followed by the lab results. The previous tests were conducted in 2016, therefore this test should have been conducted in 2022. Due to the lack of a Safety Committee during the COVID lockdown and the increased staff workload in returning to regular in-person schooling, the test was delayed a year.

#### **The following locations were tested:**

Downstairs main building - office water cooler, water fountain drinking spout, water fountain bottle filler, sink in boys room, sink in girls room. (5 sources)

Upstairs main building - water fountain, sink in boys room, sink in girls room, two kitchen sinks, two adult bathroom sinks. (7 sources)

Classroom bathroom sinks - 2nd, 3rd, 4th, 5th, Humanities, Math, Science, Art. (8 sources)

Art and Science classrooms - both have two sinks and one drinking spout. (6 sources)

There is a sink in the janitor’s closet that was not tested because students do not have access to it.

Total - 26 water source locations tested.

### **Test Process and Results:**

On October 20, 2023, The Sherwood Charter School Safety Committee drew water samples from the school to be tested for lead. Initially, only 25 test kits were ordered because the water bottle filler attached to the downstairs water fountain was not accounted for. Also, the sink in the science bathroom had been briefly turned on prior to testing, which did not meet the “first draw” standard. Two additional kits were ordered and on November 7, 2023 first draw samples were taken from both of those locations.

The samples were sent to Alexin Laboratories, the same company used for the previous test in 2016. The test results were returned on January 9, 2024. All 26 sources were below the 15 ppb limit. 24 sources were ND (none detected), the sink in the downstairs girls bathroom was 1 ppb, and the sink in the upstairs girls bathroom was 10 ppb. The two sources that were above zero will be retested and this report will be updated with those results.

No remedy action is required due to all sources being below the 15 ppb threshold.

### **Supplemental Testing Update:**

On January 26, 2024, water samples were taken from the sinks in the girls bathrooms, upstairs and downstairs in the main building. The analysis results were received from Alexin Labs on February 22, 2024. The downstairs sink was at 5 ppb (previously 1 ppb) and the upstairs sink was 3 ppb (previously 10 ppb).

No immediate action will be taken because both levels are below the EPA limit of 15 ppb. Also, there are drinking fountains right outside the doors of both bathrooms, decreasing the likelihood that water would be consumed from the sinks. Further discussion will be had with the School Board, Safety Committee, and church personnel. If any action is taken or additional testing done, this report will be updated.

### **Supplemental Testing Update:**

On January 31, 2025, water samples were taken from the sinks in the girls bathrooms, upstairs and downstairs in the main building. The analysis results were received from Alexin Labs on February 11, 2025. The downstairs sink was at 4.4 ppb (previously 5 ppb) and the upstairs sink was 3 ppb (previously 3 ppb).

No immediate action will be taken because both levels are below the EPA limit of 15 ppb. Also, there are drinking fountains right outside the doors of both bathrooms, decreasing the likelihood that water would be consumed from the sinks. Further discussion will be had with the School Board, Safety Committee, and church personnel. If any action is taken or additional testing done, this report will be updated.

### **Supporting documents:**

Laboratory analysis report pdf “Alexin Lab Results 2023”

Testing chain of custody pdf “Chain of Custody 2023”

Supplemental Testing Results pdf “Alexin Lab Results Feb 2024”

Supplemental Testing Results pdf “Alexin Lab Results Feb 2025”

### **Links to OR state regulations:**

Oregon Statute (ORS) 332.331 requires schools to develop a Healthy and Safe Schools Plan that includes in part (3)(c), “Provisions regarding testing for, and reducing exposure to, elevated levels of lead in water used for drinking or food preparation as required under guidelines adopted by the authority.”

[https://oregon.public.law/statutes/ors\\_332.331](https://oregon.public.law/statutes/ors_332.331)

ORS 332.334 requires the test results to be made “available to the public no later than 10 business days after receiving the test results.” [https://oregon.public.law/statutes/ors\\_332.334](https://oregon.public.law/statutes/ors_332.334)

Accredited drinking water laboratories.

<https://www.oregon.gov/oha/ph/healthyenvironments/drinkingwater/monitoring/pages/labs.aspx>

Oregon Administrative Rule (OAR) 333-061-0400 (Reducing Lead in School Drinking Water) describes the specific requirements of how the water is to be collected and analyzed.

<https://www.oregon.gov/oha/PH/HEALTHYENVIRONMENTS/DRINKINGWATER/RULES/Documents/61-0400.pdf>



**Professional  
Laboratory  
Services**

13035 SW Pacific Hwy  
Tigard, OR 97223  
Tel.: (503) 639-9311 Fax: (503) 684-1588

**ANALYSIS REPORT**

Reported: 10/27/2023  
Received: 10/20/2023  
Sampled By: Joe Whitehead  
Work Order: 3293001

**C** Sherwood Charter School  
**L** Attn: Joy Raboli  
**I** 23264 SW Main St.  
**E** Sherwood OR, 97140  
**N**  
**T** Phone: (503) 925-8007

**Project:**  
Project # : N/A  
Sample Type :

Sampling Location: School

**Lab Number**

Lab Number	Code	Method	Result	Units	MRL	EPA MCL*	Analysis Date/ Time
<b>3293001-01</b>	<b>Sample Name:</b> Downstairs Fountain Bottle Filler <b>Sampled:</b> 10/20/23 8:15		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-02</b>	<b>Sample Name:</b> Downstairs Boys Room <b>Sampled:</b> 10/20/23 8:20		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-03</b>	<b>Sample Name:</b> Downstairs Girls Room <b>Sampled:</b> 10/20/23 8:20		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	1	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-04</b>	<b>Sample Name:</b> Office Water <b>Sampled:</b> 10/20/23 8:22		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-05</b>	<b>Sample Name:</b> Upstairs Bathroom Left <b>Sampled:</b> 10/20/23 8:28		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-06</b>	<b>Sample Name:</b> Upstairs Bathroom Right <b>Sampled:</b> 10/20/23 8:30		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-07</b>	<b>Sample Name:</b> Upstairs Fountain <b>Sampled:</b> 10/20/23 8:32		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-08</b>	<b>Sample Name:</b> Upstairs Boys Room <b>Sampled:</b> 10/20/23 8:35		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-09</b>	<b>Sample Name:</b> Upstairs Girls Room <b>Sampled:</b> 10/20/23 8:36		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	10	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-10</b>	<b>Sample Name:</b> Kitchen Sink Left <b>Sampled:</b> 10/20/23 8:38		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03



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Sampled By: Joe Whitehead  
Work Order: 3293001

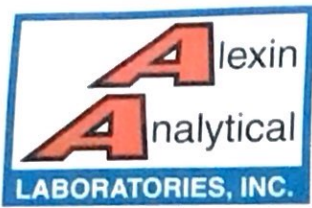
**C** **Sherwood Charter School**  
**L** Attn: Joy Raboli  
**I** 23264 SW Main St.  
**E** Sherwood OR, 97140  
**N** Phone: (503) 925-8007  
**T**

**Project:**  
Project # : N/A  
Sample Type :

Sampling Location: School

## Lab Number

Lab Number	Code	Method	Result	Units	MRL	EPA MCL*	Analysis Date/ Time
<b>3293001-11</b>	<b>Sample Name:</b> Kitchen Sink Right <b>Sampled:</b> 10/20/23 8:39		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-12</b>	<b>Sample Name:</b> Second Grade <b>Sampled:</b> 10/20/23 8:47		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-13</b>	<b>Sample Name:</b> Fourth Grade <b>Sampled:</b> 10/20/23 8:49		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-14</b>	<b>Sample Name:</b> Third Grade <b>Sampled:</b> 10/20/23 8:51		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-15</b>	<b>Sample Name:</b> Fifth Grade <b>Sampled:</b> 10/20/23 8:53		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-16</b>	<b>Sample Name:</b> Humanities <b>Sampled:</b> 10/20/23 8:56		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-17</b>	<b>Sample Name:</b> Math <b>Sampled:</b> 10/20/23 8:58		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-18</b>	<b>Sample Name:</b> Science Left Sink <b>Sampled:</b> 10/20/23 9:03		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-19</b>	<b>Sample Name:</b> Science Water Fountain <b>Sampled:</b> 10/20/23 9:04		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-20</b>	<b>Sample Name:</b> Science Right Sink <b>Sampled:</b> 10/20/23 9:06		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03



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# ANALYSIS REPORT

Reported: 10/27/2023  
Received: 10/20/2023  
Sampled By: Joe Whitehead  
Work Order: 3293001

**C** Sherwood Charter School  
**L** Attn: Joy Raboli  
**I** 23264 SW Main St.  
**E** Sherwood OR, 97140  
**N** Phone: (503) 925-8007  
**T**

**Project:**  
Project # : N/A  
Sample Type :

Sampling Location: School

## Lab Number

Lab Number	Code	Method	Result	Units	MRL	EPA MCL*	Analysis Date/ Time
<b>3293001-21</b>	<b>Sample Name:</b> Science Bathroom <b>Sampled:</b> 10/20/23 9:08		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-22</b>	<b>Sample Name:</b> Art Bathroom <b>Sampled:</b> 10/20/23 9:12		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-23</b>	<b>Sample Name:</b> Art Left Sink <b>Sampled:</b> 10/20/23 9:14		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-24</b>	<b>Sample Name:</b> Art Drinking Fountain <b>Sampled:</b> 10/20/23 9:15		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03
<b>3293001-25</b>	<b>Sample Name:</b> Art Right Sink <b>Sampled:</b> 10/20/23 9:16		<b>Matrix:</b> Drinking Water				
+Lead	1030	EPA 200.9	ND	ppb	1	15 ppb	10/24/23 16:03

**ND** = None detected at the MRL      **MRL** = Minimum Reporting Limit      **MCL** = Maximum Contamination Limit

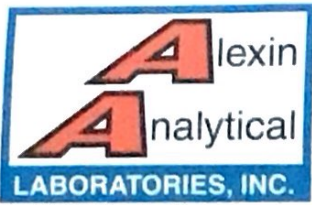
†All procedures for this analysis are in accordance with NELAP standards.

\* The EPA MCL for Lead in Public Drinking Water Systems is 15 ppb; this is a maximum contamination level for lead in samples, this is not an acceptance level for health based exposure.

**Note:** Please make sure to send your results to the appropriate agency; Alexin Analytical does not forward these results to any program or person other than the above listed client. It is your responsibility to make sure these results get sent to whichever agency, city, or organization has requested them if these results are for compliance purposes.

Approved by \_\_\_\_\_

Adriane Gonzalez Gray  
Laboratory Director



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Tigard, OR 97223  
Tel: (503) 639-9311 Fax: (503) 684-1588

# ANALYSIS REPORT

Reported: 11/15/2023  
Received: 11/07/2023  
Sampled By: Joe Whitehead  
Work Order: 3311014

**C** Sherwood Charter School  
**L** Attn: Joy Raboli  
**I** 23264 SW Main St.  
**E** Sherwood OR, 97140  
**N** Phone: (503) 925-8007  
**T**

**Project:**  
Project # : N/A  
Sample Type :

Sampling Location: School

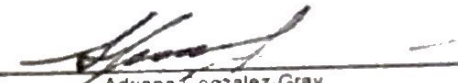
## Lab Number

Code	Method	Result	Units	MRL	EPA MCL*	Analysis Date/ Time
<b>3311014-01</b>	<b>Sample Name:</b> Science Bathroom <b>Sampled:</b> 11/7/23 6:25					<b>Matrix:</b> Water
+Lead	1030 EPA 200.9	ND	ppb	1	15 ppb	11/13/23 17:22
<b>3311014-02</b>	<b>Sample Name:</b> Downstairs Fountain Drinking Spout <b>Sampled:</b> 11/7/23 6:20					<b>Matrix:</b> Water
+Lead	1030 EPA 200.9	ND	ppb	1	15 ppb	11/13/23 17:22

ND = None detected at the MRL    MRL = Minimum Reporting Limit    MCL = Maximum Contamination Limit  
†All procedures for this analysis are in accordance with NELAP standards.

\* The EPA MCL for Lead in Public Drinking Water Systems is 15 ppb; this is a maximum contamination level for lead in samples, this is not an acceptance level for health based exposure.

**Note:** Please make sure to send your results to the appropriate agency; Alexin Analytical does not forward these results to any program or person other than the above listed client. It is your responsibility to make sure these results get sent to whichever agency, city, or organization has requested them if these results are for compliance purposes.

Approved by:   
Adriana Gonzalez-Gray  
Laboratory Director

This report shall not be reproduced except in full, without the written approval of the laboratory



Professional Laboratory Services

# Chain of Custody Record

Laboratory Job Number: \_\_\_\_\_

13035 SW Pacific Hwy Tigard, OR 97223 ph: 503.639.9311 fax: 503.684.1588 email: mail@alexinlabs.com

Client Contact Information	Results Reporting Information	Invoicing Information
Company/Client Name: <u>Sherwood Charter School</u>	Project Manager: <u>Jay Raboli</u>	Accounts Payable Contact:
Address: <u>23265 SW Main St.</u>	Mailing Address: <u>Same</u>	Mailing Address:
City/State/Zip: <u>Sherwood OR 97140</u>	City/State/Zip:	City/State/Zip:
phone: <u>503-925-8007</u>	phone:	phone:
fax or email:	fax or email: <u>jraboli@sherwoodcharter-school.org</u>	fax or email:

## SAMPLING INFORMATION

Sampling Location: <u>School</u>	P.O. #:	PWSID #:
Sampled By: <u>Joe Whitehead</u>	Project Name:	Permit #:

Send results to OR State Health Division? (Please circle) Yes No

Lab ID <small>Lab use only</small>	Sample Identification <small>Please enter a unique ID per line for each separate sample</small>	Date Collected	Time Collected <small>(Begin-End if comp.)</small>	Sample Matrix*	# of cont. rec'd	Analysis Requested**										SEE ATTACHED	Sample Specific Notes/Field Data <small>for each WW sample, specify <u>Grab</u> / <u>Composite</u> for each DW sample, specify <u>Raw</u> / <u>Treated</u>, <u>Source</u> / <u>Distribution</u> <u>Single</u> / <u>Combined</u> WHERE APPLICABLE</small>
	<u>Downstairs Fountain + 10/20/08 Bottle</u>	<u>10/20</u>	<u>0815</u>														
	<u>Downstairs Boys Room</u>	<u>10/20</u>	<u>0820</u>														
	<u>Downstairs Girls Room</u>	<u>10/20</u>	<u>0820</u>														
	<u>Office Water</u>	<u>10/20</u>	<u>0822</u>														
	<u>Upstairs Bathroom Left</u>	<u>10/20</u>	<u>0828</u>														
	<u>Upstairs Bathroom Right</u>	<u>10/20</u>	<u>0830</u>														
	<u>Upstairs Fountain</u>	<u>10/20</u>	<u>0830</u>														
	<u>Upstairs Boys Room</u>	<u>10/20</u>	<u>0835</u>														
	<u>Upstairs Girls Room</u>	<u>10/20</u>	<u>0836</u>														
	<u>Kitchen Sink Left</u>	<u>10/20</u>	<u>0838</u>														

Relinquished By (print): _____	Company: _____	Date/Time: _____	Signature: _____	Received By: _____	Company: _____	Date/Time: _____	Signature: _____
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Relinquished By (print): _____	Company: _____	Date/Time: _____	Signature: _____	Received By: _____	Company: _____	Date/Time: _____	Signature: _____
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The most current revision of SOP-10-003 was used when these samples were collected

Received by Laboratory Log-In Staff: \_\_\_\_\_ Date/Time: \_\_\_\_\_ Temp. on receipt: \_\_\_\_\_ °C On ice? Y N  
Containers Intact? Y N ID: TRM-10-\_\_\_\_\_

\* Drinking water (DW), effluent (EFF), ground water (GW), influent (INF), non-aqueous liquid (NAL), paint chips, raw water (RW), sludge, soil, solid, source water (SOURCE), spring, stormwater (SW), surface water, wastewater (WW), well water (WELL)  
\*\* Analyses for SOC, Radionuclide, Radon, and Asbestos are subcontracted out to other accredited laboratories.



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Laboratory Job Number: \_\_\_\_\_

13035 SW Pacific Hwy Tigard, OR 97223 ph: 503.639.9311 fax: 503.684.1588 email: mail@alexinlabs.com

Client Contact Information	Results Reporting Information	Invoicing Information
Company/Client Name: <u>Sherwood Charter School</u>	Project Manager: <u>Joy Rabol</u>	Accounts Payable Contact:
Address: <u>23264 SW Main St.</u>	Mailing Address: <u>Same</u>	Mailing Address:
City/State/Zip: <u>Sherwood OR 97140</u>	City/State/Zip:	City/State/Zip:
phone: <u>503-925-8007</u>	phone:	phone:
fax or email:	fax or email: <u>jrabol@sherwoodcharter.org</u>	fax or email:

## SAMPLING INFORMATION

Sampling Location: <u>School</u>	P.O. #:	PWSID #:
Sampled By: <u>Joe Whitehead</u>	Project Name:	Project #:
Project #:	Permit #:	

Send results to OR State Health Division? (Please circle) Yes No	Analysis Requested**	SEE ATTACHED	Sample Specific Notes/Field Data for each WW sample, specify <u>Grab</u> / <u>Composite</u> for each DW sample, specify <u>Raw</u> / <u>Treated</u> , <u>Source</u> / <u>Distribution</u> , <u>Single</u> / <u>Combined</u> WHERE APPLICABLE

Lab ID <small>Lab use only</small>	Sample Identification <small>Please enter a unique ID per line for each separate sample</small>	Date Collected	Time Collected <small>(Begin-End if comp.)</small>	Sample Matrix*	# of cont. rec'd													
	Kitchen Sink Right	10/20	0839															
	Second Grade	10/20	0847															
	Fourth Grade	10/20	0849															
	Third Grade	10/20	0851															
	Fifth Grade	10/20	0853															
	Humanities	10/20	0856															
	Math	10/20	0858															
	Science Left Sink	10/20	0903															
	Science Water Fountain	10/20	0904															
	Science Right Sink	10/20	0906															

Relinquished By (print): _____	Company: _____	Date/Time: _____	Signature: _____	Received By: _____	Company: _____	Date/Time: _____	Signature: _____
Relinquished By (print): _____	Company: _____	Date/Time: _____	Signature: _____	Received By: _____	Company: _____	Date/Time: _____	Signature: _____

The most current revision of SOP-10-003 was used when these samples were collected

Received by Laboratory Log-In Staff: _____	Date/Time: _____	Temp. on receipt: _____ °C	On ice? Y N
		Containers Intact? Y N	ID: TRM-10- _____

\* Drinking water (DW), effluent (EFF), ground water (GW), influent (INF), non-aqueous liquid (NAL), paint chips, raw water (RW), sludge, soil, solid, source water (SOURCE), spring, stormwater (SW), surface water, wastewater (WW), well water (WELL)

\*\* Analyses for SOC, Radionuclide, Radon, and Asbestos are subcontracted out to other accredited laboratories.



Professional Laboratory Services

# Chain of Custody Record

Laboratory Job Number: \_\_\_\_\_

13035 SW Pacific Hwy Tigard, OR 97223 ph: 503.639.9311 fax: 503.684.1588 email: mail@alexinlabs.com

Client Contact Information	Results Reporting Information	Invoicing Information
Company/Client Name: <u>Sherwood Charter School</u>	Project Manager: <u>Joy Raboli</u>	Accounts Payable Contact:
Address: <u>23265 SW Main St.</u>	Mailing Address: <u>Same</u>	Mailing Address:
City/State/Zip: <u>Sherwood OR 97140</u>	City/State/Zip:	City/State/Zip:
phone: <u>503-925-8007</u>	phone:	phone:
fax or email:	fax or email: <u>jraboli@sherwoodcharter.edu</u>	fax or email:

## SAMPLING INFORMATION

Sampling Location: <u>School</u>	P.O. #:	PWSID #:
Sampled By: <u>Joe Whitehead</u>	Project Name:	Permit #:

Send results to OR State Health Division? (Please circle) Yes No

Lab ID <small>Lab use only</small>	Sample Identification <small>Please enter a unique ID per line for each separate sample</small>	Date Collected	Time Collected <small>(Begin/End if comp.)</small>	Sample Matrix*	# of cont. rec'd	Analysis Requested**										SEE ATTACHED	Sample Specific Notes/Field Data <small>for each WW sample, specify <u>Grab</u> / <u>Composite</u> for each DW sample, specify <u>Raw</u> / <u>Treated</u>, <u>Source</u> / <u>Distribution</u> <u>Single</u> / <u>Combined</u> WHERE APPLICABLE</small>
	<u>Science Bathroom</u>	<u>10/20</u>	<u>0908</u>													<u>Prior use for one hand washing</u>	
	<u>Art Bathroom</u>	<u>10/20</u>	<u>0912</u>														
	<u>Art Left Sink</u>	<u>10/20</u>	<u>0914</u>														
	<u>Art Drinking Fountain</u>	<u>10/20</u>	<u>0915</u>														
	<u>Art Right Sink</u>	<u>10/20</u>	<u>0916</u>														

Relinquished By (print): _____	Company: _____	Date/Time: _____	Signature: _____	Received By: _____	Company: _____	Date/Time: _____	Signature: _____
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Relinquished By (print): _____	Company: _____	Date/Time: _____	Signature: _____	Received By: _____	Company: _____	Date/Time: _____	Signature: _____
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The most current revision of SOP-10-003 was used when these samples were collected

Received by Laboratory Log-In Staff: \_\_\_\_\_ Date/Time: \_\_\_\_\_ Temp. on receipt: \_\_\_\_\_ °C On ice? Y N  
Containers Intact? Y N ID: TRM-10-\_\_\_\_\_

\* Drinking water (DW), effluent (EFF), ground water (GW), influent (INF), non-aqueous liquid (NAL), paint chips, raw water (RW), sludge, soil, solid, source water (SOURCE), spring, stormwater (SW), surface water, wastewater (WW), well water (WELL)

\*\* Analyses for SOC, Radionuclide, Radon, and Asbestos are subcontracted out to other accredited laboratories.



Professional Laboratory Services

# Chain of Custody Record

Laboratory Job Number: \_\_\_\_\_

Page 1 of 1

13035 SW Pacific Hwy Tigard, OR 97223 ph: 503.639.9311 fax: 503.684.1588 email: mail@alexinlabs.com

<b>Client Contact Information</b>	<b>Results Reporting Information</b>	<b>Invoicing Information</b>
Company/Client Name: <u>Sherwood Charter School</u>	Project Manager: <u>Joy Raboli</u>	Accounts Payable Contact:
Address: <u>23264 SW main St</u>	Mailing Address: <u>Same</u>	Mailing Address:
City/State/Zip: <u>Sherwood OR 97140</u>	City/State/Zip:	City/State/Zip:
phone: <u>503-925-8007</u>	phone:	phone:
fax or email:	fax or email: <u>jraboli@sherwoodcharterSchool.org</u>	fax or email:

## SAMPLING INFORMATION

Sampling Location: <u>School</u>	P.O. #:	PWSID #:
Sampled By: <u>Jac Wh. tehead</u>	Project Name:	Permit #:

Send results to OR State Health Division? (Please circle) Yes No

Lab ID	Sample Identification	Date Collected	Time Collected	Sample Matrix*	# of cont. rec'd	Analysis Requested**										SEE ATTACHED	Sample Specific Notes/Field Data for each WW sample, specify <u>Grab</u> / <u>Composite</u> for each DW sample, specify <u>Raw</u> / <u>Treated</u> . <u>Source</u> / <u>Distribution</u> <u>Single</u> / <u>Combined</u> WHERE APPLICABLE
	<u>Science bathroom</u>	<u>11/5/06</u>	<u>11:00</u>														
	<u>Downstairs Fountain Drinking Spout</u>	<u>11/7/06</u>	<u>06:00</u>														

Relinquished By (print):	Company:	Date/Time:	Signature:	Received By:	Company:	Date/Time:	Signature:
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Relinquished By (print):	Company:	Date/Time:	Signature:	Received By:	Company:	Date/Time:	Signature:
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The most current revision of SOP-10-003 was used when these samples were collected

Received by Laboratory Log-In Staff: Date/Time: Temp. on receipt: \_\_\_\_\_ °C On ice? Y N  
Containers Intact? Y N ID: TRM-10-\_\_\_\_\_

\* Drinking water (DW), effluent (EFF), ground water (GW), influent (INF), non-aqueous liquid (NAL), paint chips, raw water (RW), sludge, soil, solid, source water (SOURCE), spring, stormwater (SW), surface water, wastewater (WW), well water (WELL)

\*\* Analyses for SOC, Radionuclide, Radon, and Asbestos are subcontracted out to other accredited laboratories.



**Professional  
Laboratory  
Services**

13035 SW Pacific Hwy  
Tigard, OR 97223  
Tel.: (503) 639-9311 Fax: (503) 684-1588

# ANALYSIS REPORT

Reported: 02/02/2024  
Received: 01/26/2024  
Sampled By: Joe Whitehead  
Work Order: 4026001

**C** **Sherwood Charter School**  
**L** Attn: Joy Raboli  
**I** 23264 SW Main St.  
**E** Sherwood OR, 97140  
**N** Phone: (503) 925-8007  
**T**

**Project:**  
Project # : N/A  
Sample Type :

Sampling Location: School

## Lab Number

Lab Number	Code	Method	Result	Units	MRL	EPA MCL*	Analysis Date/ Time
<b>4026001-01</b>	<b>Sample Name:</b> Downstairs Girls Room <b>Sampled:</b> 1/26/24 6:52						<b>Matrix:</b> Drinking Water
†Lead	1030	EPA 200.9	5	ppb	1	15 ppb	01/31/24 17:42
<b>4026001-02</b>	<b>Sample Name:</b> Upstairs Girls Room <b>Sampled:</b> 1/26/24 6:54						<b>Matrix:</b> Drinking Water
†Lead	1030	EPA 200.9	3	ppb	1	15 ppb	01/31/24 17:42

**ND** = None detected at the MRL    **MRL** = Minimum Reporting Limit    **MCL** = Maximum Contamination Limit  
†All procedures for this analysis are in accordance with NELAP standards.

\* The EPA MCL for Lead in Public Drinking Water Systems is 15 ppb; this is a maximum contamination level for lead in samples, this is not an acceptance level for health based exposure.

**Note:** Please make sure to send your results to the appropriate agency; Alexin Analytical does not forward these results to any program or person other than the above listed client. It is your responsibility to make sure these results get sent to whichever agency, city, or organization has requested them if these results are for compliance purposes.

Approved by: \_\_\_\_\_



Adriana Gonzalez-Gray  
Laboratory Director



Professional Laboratory Services

13035 SW Pacific Hwy
Tigard, OR 97223
Tel.: (503) 639-9311 Fax: (503) 684-1588

ANALYSIS REPORT

Reported: 02/11/2025
Received: 01/31/2025
Sampled By: Gina Byers
Work Order: 5031001

Paid CC

CLIENT Sherwood Charter School
Attn: Gina Byers
23264 SW Main St.
Sherwood OR, 97140
Phone: (503) 925-8007

Project:
Project #: N/A
Sample Type:

Sampling Location: Sherwood Charter School

Lab Number

Table with 8 columns: Lab Number, Code, Method, Result, Units, MRL, EPA MCL\*, Analysis Date/ Time. Contains two rows of data for lead analysis in girls' bathrooms.

ND = None detected at the MRL MRL = Minimum Reporting Limit MCL = Maximum Contamination Limit
All procedures for this analysis are in accordance with NELAP standards.

\* The EPA MCL for Lead in Public Drinking Water Systems is 15 ppb; this is a maximum contamination level for lead in samples, this is not an acceptance level for health based exposure.

Note: Please make sure to send your results to the appropriate agency; Alexin Analytical does not forward these results to any program or person other than the above listed client.

Approved by: [Signature]
Adriana Gonzalez-Gray
Laboratory Director