

Associated Laboratories

806 N. Batavia - Orange, CA 92868 Tel (714)771-6900 Fax (714)538-1209 www.associatedlabs.com Info@associatedlabs.com



Client:

McCampbell Analytical, Inc.

Address:

1534 Willow Pass Rd. Pittsburg, CA 94565

Attn:

Ana Venegas

Comments: 1112349

Lab Request: 296297 Report Date: 12/19/2011 Date Received: 12/14/2011 Client ID: 14025

This laboratory request covers the following listed samples which were analyzed for the parameters indicated on the attached Analytical Result Report. All analyses were conducted using the appropriate methods indicated on the attached report and all NELAC criteria. This cover letter is an integral part of the final report.

Sample #

Client Sample ID

296297-001

Saturated Moleculoc

Thank you for the opportunity to be of service to your company. Please feel free to call if there are any questions regarding this report or if we can be of further service.

ASSOCIATED LABORATORIES by,

Edward S. Behare, Ph.D.

Lab Director

NOTE: Unless notified in writing, all samples will be discarded by appropriate disposal protocol 45 days from date reported.

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TESTING & CONSULTING Chemical Microbiological Environmental

Sample #:

296297-001

Client:

McCampbell Analytical, Inc.

Matrix: Solid

Client Sample #: Saturated Moleculoc

Collect Date: 12/12/11 Site:

Collect Time: 11:30 AM

Collector:

client

Compound	Result DF	RDL Units Analysis Date Analyst
Method: EPA 1030	Prep Method: Method	QCBatchID:
lgnitability	Pass 1	mm/sec 12/15/11 hanhkhong



296297

McCampbell Analytical, Inc.

Pittsburg, CA 94565-170 Fax: (925) 252-9269 Phone: (925) 252-9262 1534 Willow Pass Rd

Subcontractor:

806 North Batavia Street Orange, CA 92868 Associated Labs

(714) 771-6900 (714) 538-1209

TEL: FAX:

Moleculoc

ProjectNo: Acct #:

WorkOrder: 1112349

ClientCode: MSSCP

EDF: NO

Date Received: 12/12/2011

12/12/2011

Date Printed:

Requested Tests SW1030 12/12/2011 11:30 Standard TAT Collection Date Matrix Solid Saturated Moleculoc Client ID 1112349-001A Lab ID

Phase analyze for flashpoint by epa 1030.

Comments:

PLEASE USE 'CLIENTID' AS THE SAMPLE ID AND EMAIL ASAP!

Please email results to Zoraida Cortez at subdata@mccampbell.com, Appon dompletion.

11/61/21

Date/Time

Received by:

Received by:

Relinquished by: Relinquished by:



ASSOCIATED LABORATORIES

806 North Batavia - Orange, California 92868 - 714-771-6900

FAX 714-538-1209

SAMPLE ACCEPTANCE CHECKLIST

Section 1 W C (A MAN DO (A MAN A) (Project:			
Show I Toject.			
Date Received: 12-14-1 Sampler's Name: Fr	es) N	O .	
Sample(s) received in cooler: (Skip Section 2) No (Skip Section 2)			
Shipping Information:			
Section-2			
Was the cooler packed with: \ Ice \ Ice \ Dalka \ Dalk	Va	C	
Paner None Other	$\sim 10^{-1}$	yroioan	n
Was the cooler packed with: Ice Ice Packs Bubble Wrap Paper None Other Cooler or box temperature: 2.0c			
(Acceptance range is 2 to 6 Deg. C.)			
	, , , , , , , , , , , , , , , , , , ,		
C-42	· · · · · ·		
Section 3 Was a COC received?	YES	NO	N/A
	$+$ \times $-$		
Is it properly completed? (IDs, sampling date and time, signature, test) Were custody seals present?	 >-		
If Yes – were they intact?	 	\succ	
Were all samples sealed in plastic bags?			
Did all samples arrive intact? If no, indicate below.	X		
Did all bottle labels agree with COC? (ID, dates and times)			
Were correct containers used for the tests required?			
Was a sufficient amount of sample sent for tests indicated?			
Was there headspace in VOA vials?			
Were the containers labeled with correct preservatives?			
Was total residual chlorine measured (Fish Bioassay samples only)? *			
*: If the answer is no, please inform Fish Bioassay Dept. immediately.			
. If the answer is no, please inform rish bloassay Dept. infinediately.			
Section 4			
Explanations/Comments			
,			
·			
Section 5			
Was Project Manager notified of discrepancies: Y / N N/A			
			Ì
			1
Completed By: Date: Date:		-	