

Florida Department of Environmental Protection Safe Drinking Water Program Laboratory Reporting Format

ATTACH CURRENT DOH ANALYTE SHEET*

Lab Name: Benchmark EnviroAnalytical, Inc.

Florida Certification #: E 84167

Address: 1711 12th Street East
Palmetto, FL 34221

Certification Expiration Date: 06/30/2010

Phone #: 941-723-9986

ANALYSIS INFORMATION (to be completed by lab)

Date Sample(s) Received: 01/08/10

PWS ID (From Page 1): _____

Sample Number (From Page 1): _____

Lab Assigned Report Number or Job ID: 10010298

Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):

- Inorganics
 All 17
 Partial
 Nitrate
 Nitrite
 Asbestos Only

- Synthetic Organics
 All 30
 All Except Dioxin
 Partial
 Dioxin Only

- Volatile Organics
 All 21
 Partial
Radionuclides
 Single Sample
 Qtrly Composite**

- Disinfection Byproducts
 Trihalomethanes
 Haloacetic Acids
 Bromate
 Chlorite

- Secondaries Others
 All 14 Total Solids
 Partial

Were any analyses subcontracted? Yes No

If yes, please provide DOH certification numbers: _____

ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

CERTIFICATION

I, Dale D. Dixon / Radica Koutselas, Laboratory Director / QC Officer,
(Print Name) (Print Title)

do HEREBY CERTIFY that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).

Signature: R. Koutselas Date: 01/18/10

* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.

** Please provide radiological sample dates & locations for each quarter.

COMPLIANCE DETERMINATION (to be completed by DEP or DOH)

Sample Collection Info Satisfactory: Yes No Sample Analysis Info Satisfactory: Yes No

Replacement Sample(s) Requested (circle or highlight group(s) above) Revised Report Requested (circle or highlight group(s) above)

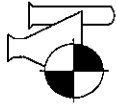
Additional Monitoring Required (circle or highlight group(s) above)

Reason(s): MCL(s) Exceeded Detection(s) Incomplete Report
 Missing Analyte Sheet(s) Location Unsatisfactory Analysis Unsatisfactory
 Other: _____

Person Notified: _____ Date Notified: _____

Comments: _____

Date Reviewed: _____ DEP/DOH Reviewing Official: _____



FDOH Certification #E84167

Touch My Skin

7719 24th Ave West
Bradenton, FL 34209
Don Sheffield

ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

REPORT NUMBER: 10010298 001
SYSTEM NAME: Touch my Skin 01/18/10
SYSTEM ID:

I.D.	Parameter NAME	(MCL)	UNITS	ANALYSIS RESULT	QUALIFIER	METHOD	MDL	DATE ANALYZED	TIME ANALYZED	LAB ID
	TOTAL SOLIDS		MG/L	360		SM2540G	1.13	01/12/2010	16:00	E84167

DATA QUALIFIERS THAT MAY APPLY:

I = Reported value is between the laboratory MDL and the PQL (PQL = 4 x MDL).

Q = Sample held beyond accepted holdtime.

U = Analyte analyzed but not detected at the value indicated.

X = Value exceeds MCL.

NOTES:

MBAS calculated as LAS; molecular weight = 348.

Analysis does not constitute endorsement of this product.

For questions and comments regarding these results, please contact Bettina Beifuss at (941) 723-9986

Results relate only to the samples.

Benchmark EnviroAnalytical, Inc.

1711 Twelfth Street East
 Palmetto, FL 34221
 (941) 723-9986
 (941) 723-6061 fax

www.Benchmarkarkea.com

Client Name:

Touch My Skin
 Address: 7719 24th Ave West
 City, State, Zip: Bradenton, FL 34209
 Phone: 941-792-8500 Don Sheffield
 Fax:
 Email Address:

Project Name: TOTAL SOLIDS ANALYSIS

Laboratory Submission #:

10010298

Sample I.D.	Sample Type ¹	Sample Matrix ²	Collection		Container		Preservative ⁴	Parameters for Analysis	Laboratory Sample #
			Date	Time	Qty	Capacity			
Touch My Skin	DW	Grab	01/22/07	3:11	1	1/2 Pt	P	TOTAL SOLIDS	1

- "Sample Type" is used to indicate whether the sample was a grab (G) or whether it was a composite (C).
- "Sample Matrix" is used to indicate whether the sample is being discharged to drinking water (DW), groundwater (GW), surface water (SW), soil, sediment (SDMNT), or sludge (SLDG).
- "Container Type" is used to indicate whether the container is plastic (P) or glass (G).
- Sample must be refrigerated or stored in wet ice after collection. The maximum temperature during storage should be 4°C (39.2°F). Under "Preservative," list any preservatives that were added to the sample container.

Instructions:

- Each bottle has a label identifying sample ID, premeasured preservative contained in the bottle, sample type, client ID, and parameters for analysis. The following information should be added to each bottle label after collection with permanent black ink: date and time of collection, sampler's name or initials, and any field number or ID.
- All bottles not containing preservative may be rinsed with appropriate sample prior to collection.
- The client is responsible for documentation of the sampling event. Please note special sampling events on the sample custody form.

**Analysis does not constitute endorsement to this product @ 1-800-per-300*

Laboratory Sample Acceptability
 Temperature:
 pH:

1	Collector:	Date:	Time:	Received By:	Date:	Time:
2	Relinquished By: Don Ed - Sheffield	Date: 12/16/07	Time: 3:11	Received By:	Date: 11/12/07	Time: 11:52
3	Relinquished By:	Date:	Time:	Received By: Sheffield	Date: 11/08/10	Time: 1547