



Sample Receipt Confirmation

Invoice Distribution: **Report Distribution:**

Acct Name: EDI ENVIRONMENTAL DYNAMICS Company Name: **EDI ENVIRONMENTAL DYNAMICS** INC.

INC.

Contact: Lyndsay Doetzel Contact: Accounts Payable Address: 2195 - 2nd Ave, Address: 2195 2nd Avenue,

Whitehorse, YT, Y1A 3T8

Phone: 867-393-4882

Fax:

Email: Idoetzel@edynamics.com

emilie.hamm@gov.yk.ca

erik.pit@gov.yk.ca

EDD Email:

Distribution: Hard Copy: N

Fax: N EDD: N Project #:

Phone:

Invoice Email:

Chain Of Custody:

Whitehorse, YT, Y1A 3T8

sjenner@edynamics.com

Idoetzel@edynamics.com

867-393-4882

867-393-4883

JM/GR

Account #: EDI100

Client Information:

Workorder Summary:

Job Reference #: Date Sampled: 05-DEC-16 **MOUNT NANSEN 16Y0089** Project PO #: Date Received: 07-DEC-16 Legal Site Description: N/A Sampled By:

Email: Y

Quote #: Q55559

> MOUNT NANSEN 16Y0089 Client Job #:

Lab Work Order #: L1867796 Account Manager: Can Dang

Estimated completion date: 16-DEC-16 Estimated sample disposal date: See Sample Disposal Information section

below. 13 Samples received at ALS in VANCOUVER

Note: There are sample integrity issues with your samples submitted. Please see Sample Integrity Observations below for more details.

Lab Sample ID	Client Sample ID	Date Sampled	Date Received	Sample Priority Due Date Flag	Sample Type
L1867796-1	WQ-SEEP	05-DEC-16 15:15	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-2	WQ-VC-UMN	06-DEC-16 12:45	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-3	WQ-DC-DX+105	05-DEC-16 16:40	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-4	WQ-SEEP	05-DEC-16 15:15	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-5	WQ-DC-U	05-DEC-16 14:50	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-6	WQ-TP-R	05-DEC-16 16:00	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-7	WQ-PW	06-DEC-16 15:55	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-8	WQ-VC-DBC	06-DEC-16 10:25	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-9	WQ-FIELD BLANK	06-DEC-16 15:30	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-10	WQ-TRAVEL BLANK	06-DEC-16 00:00	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-11	WQ-VC-U	06-DEC-16 10:45	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-12	WQ-VC-R+150	05-DEC-16 13:05	07-DEC-16 10:51	16-DEC-16	WATER
L1867796-13	WQ-TP	05-DEC-16 15:50	07-DEC-16 10:51	16-DEC-16	WATER



Analysis Requested :	Alkalinity Species by Titration	ons by Chromatography	O.	Thiocyanate by Colour	Cyanide in water 7A	Weak Acid Diss. Cyanide in water by CFA	Conductivity [Automated]	Drinking Water Full Package	lon Balance Calculation	Dissolved Metals in Water + Hg [BC MDG]	Total Metals in Water + Hg [BC MDG]	Ammonia in Water by Fluorescence	pH by Meter [Automated]	[Calculated]	Trout Bioassay LC50 [96 Hour] - Nautilus	Total Suspended Solids by Gravimetric	Sample Handling and Disposal Fee
	Alkalinity S by Titration	Anions by Ion Chron	Cyanate	Thiocy	Total Cy by CFA	Weak Acid in water by	Condu	Drinking Wat Full Package	lon Ba	Dissolv Water	Total N Hg [B0	Ammo by Fluc	pH by	TDS [C	Trout E Hour] -	Total S by Gra	Sample Hand Disposal Fee
WQ-SEEP		•	•	•	•			•		•				•	✓		✓
WQ-VC-UMN	✓	✓	√	✓	√	✓	√		✓	✓	✓	✓	✓	✓		✓	
WQ-DC-DX+105	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	✓
WQ-SEEP	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	✓
WQ-DC-U	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	✓
WQ-TP-R	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	✓
WQ-PW								✓									✓
WQ-VC-DBC	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	✓
WQ-FIELD BLANK	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	✓
WQ-TRAVEL BLANK	✓	✓	✓	✓	✓	✓	✓		✓		✓	✓	✓	✓		✓	✓
WQ-VC-U	√	✓	✓	✓	√	✓	✓		✓	✓	√	✓	✓	√		√	✓
WQ-VC-R+150	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓	✓
WQ-TP	✓	✓	✓	✓	✓	√	√		√	✓	✓	✓	✓	√		✓	✓

Hold Time Exceedences: The following samples have exceeded recommended holding times prior to sample receipt.
Tiola Timo Excocacitoco

Analysis Requested	Lab Sample ID	Recommended Hold Time	Date Sampled	Date Received
pH by Meter (Automated)	L1867796-3, 4, 5, 6, 12, 13	0.25 hours	05-DEC-16	07-DEC-16
pH by Meter (Automated)	L1867796-2, 7, 8, 9, 10,	0.25 hours	06-DEC-16	07-DEC-16

Sample Integrity Observations:

Observation Details

Samples listed on COC but not received

No dissolved metals and hg received for sample "WQ-Travel Blank". Since it is an ALS Travel Blank, a sub sample cannot be taken. Analysis will be deleted.

Notice of Sub-contract Laboratory Service

Please be advised that the following tests will be subcontracted to the corresponding laboratory:

Cyanate subcontracted to: ALS ENVIRONMENTAL - WATERLOO, ONTARIO, CANADA Trout Bioassay LC50 (96 Hour) - Nautilus subcontracted to: NAUTILUS ENVIRONMENTAL

Please contact your Account Manager immediately should you have questions or concerns regarding this arrangement. Approval of this arrangement shall be implied unless otherwise notified by you.

Page 3 of 3 08-DEC-16 20:10 (MT)



Sample Disposal Information:

Where possible, ALS will store samples for 30 days from the date a final report is issued, or 30 days from the date samples are placed on hold without analytical requests, after which samples may be discarded. Air samples collected on re-usable media are an exception, and are stored for 7 days from the date a final report is issued. Longer storage times are available upon request.

For information about ALS accreditations and certifications please contact your Account Manager or visit our webpage at www.alsglobal.com (see Canada downloads).

ALS Group strives to deliver on-time results to our clients at all times. However, there are times when due to capacity issues or other unforeseen circumstances we are unable to meet our expected turnaround times. The information above is related to a recent workorder you have submitted to our laboratory. In the event that you have an inquiry, please refer to the Lab Work Order # when calling your Account Manager.

ALS Group appreciates your business. Thank you for the opportunity to work with you.

Whitehorse Receive

Chain of Custody (COC) / Analytical Request Form

L1867796-COFC

COC Number:

Page of 4

Canada Toll Free: 1 800 668 9878

Report To		Report Format / Distribution					Select Service Level Below (Rush Turnaround Time (TAT) is not available for all tests)										
Сотрапу:	EDI		Select Report F	ormat: 🔽 PDF	☑ EXCEL □	EDD (DIGITAL)	R Regular (Standard TAT if received by 3 pm - business days)										
Contact:	Lyndsay Doetzel		Quality Control ((QC) Report with R	eport 广Ye:	s l''No		Priority	•								
Address:	2195 - 2nd Avenue		Criteria on Repo	ort - provide details belo	ow If box checked		E	Emerge	ncy (1-2 b	uş. days	if received	by 3pm)	100% Sui	charge -	contact A	∟S to con	ifirm TAT
	Whitehorse, YT Y1A 3T8		Select Distribution			FAX	E2	Same da	ry or weel	kend eme	rgency - o	ontact ALS	to confi	s TAT m	nd surcha	rge	
Phone:	867-393-4882		Email 1 or Fax	ldoetzel@edynami	cs.com		Speci	ify Date Re	equired 1	for E2,E	or P:						
				erik_pit@gov.yk.ca													
<u>=</u> .	· -		Email 3	Emilie.Hamm@go								lysis Re	<u> </u>				
Invoice To	Same as Report To Yes	No	Invoice Distribution					Indicate	Filtered (F), Preser	ved (P) or	Filtered a	nd Prese	rved (F/F	') below	ليب	
	Copy of Invoice with Report	No _	Select Invoice Distribution: FAX MAIL FAX							<u> </u>							
Company:	EDI		Email 1 or Fax	sjenner@edynami	cs.com						[
Contact:	S Jenner			ldoetzel@edynami								ı					စ္
	Project Information		Oil	and Gas Require	,	use)						1			.		Number of Containers
ALS Quote #:	Q55559		Approver ID:		Cost Center:							-					guet
Job #:	MOUNT NANSEN 16Y0089	. <u> </u>	GL Account:		Routing Code:						i	1	1				of C
PO / AFE:			Activity Code:														ğe
LSD:			Location:				50										Ē
ALC Lab Mid	rk Order# (lab use only)		ALS Contact:	Sean-Sluggett	Sampler: \/	МІлю	Trout					1	i				~
AVES ESD AND	TK Order # (tab use offly)		ALS COMMEN.	B. Marelle	Jampier. J	MIGE.				ļ							
ALS Sample #	Sample Identification as	nd/or Coordinates		Date	Time	Sample Type	Rainbow			ł		1	l i				
(lab use only)	(This description will app	pear on the report)		(dd-mmm-yy)	(hh:mm)	Sample Type	ъ ig										
	WQ-SEEP			O5 -Dec-16	15:15	Water	R										2
			·														
	1					- "											
					<u> </u>	 					 	+	1	+	+	+	
SSIGNATURE SERVICE					 				+-	┿	 	+-	\vdash	+		 	
e e e e e e e e e e e e e e e e e e e							_			-			₩	+	-	igspace	
	57701	r T				ļ. <u> </u>			_		<u> </u>		\sqcup			!	
	RUSI																
			-	_													
								- -									
				<u> </u>				 	+	+ -	 		\vdash \vdash	+	+	\vdash	
				 	 	 	├	 	+	┼	 	+	┼╌┼	+	+	╁╌┤	
	<u> </u>	 				 	 -	┝╼┼┈				+	-			┼—	
	<u> </u>	· -		<u> </u>	<u> </u>			<u> </u>		<u> </u>	<u> </u>				Щ,	Ļ	L
Drinkin	g Water (DW) Samples ¹ (client use)	Special In	structions / Spec	ify Criteria to add o	n report (client U	se)		M icrotonic and									
_							Office	Sample of			*#: 3 *□ 3	ir Obse	rvation:			IND V	
Are samples taken from a Regulated DW System? ☐ Yes ☐ No							Cooli	no Initiate		NOT		ustody s	ear inta	DOM:		NO N	L L
,	r human drinking water use?					Frozen SIF Observations Yes No Color Interest Yes No No Color Intitated No Intitate											
L J Wie saubież to																	
I	SHIPMENT RELEASE (client use)	NITIAI C	HIPMENT RECEP	TION /lab use or	IV) >												
Released by:	Doto: IT																
Soci	MucFahre 07 Dec 1	ed by	Received by School Specific Time 12/05 Pr														
REFER TO BAC	K PAGE FOR ALS LOCATIONS AND SAMPLING	/TN = 0	WHI	ITE - LABORATOR	RY COPY YEL	OW.	CLIENT C	OPY				NA-FM-0025	Se v09 Front/0	4 Jenuary 2014		n 2.	

Short Golding Timequest Form

ll Free: 1 800 668 9878



COC Number;

Page <u>2</u> of <u>4</u>

	Vaen i-100e	<u>ssing</u>																		
Report To				Report Format	/ Distribution			Sele	ct Serv	çe Lev	el Belov	v (Rush	Turnar	round '	Time (T	AT) is n	ot availal	ble for a	ll tests)	
Company:	EDI		Select Report F	ormat: 🛂 PDF	☑EXCEL □	EDD (DIGITAL)	R	₹ Reg	ular (St	andard 1	"A" if re	ceived t	by 3 pm	1 - bus	iness da	JYS)				
Contact:	Lyndsay Doetzel		Quality Control	(QC) Report with F	≷eport Г ‴Yes	⊢ No	Р	Prio	rity (2-4	bus. da	ys if rec	eived b	y 3pm)	50%	surchar	je - conf	lact ALS 1	to confir	m TAT	
Address:	2195 - 2nd Avenue		Criteria on Rep	ort - provide details beid	w if box checked		E	Eme	ergency	(1-2 bus	s. days ii	receive	ed by 3	pm) 1	00% Sui	charge -	- contact	ALS to d	onfirm T	/AT
	Whitehorse, YT Y1A 3T8		Select Distribut			☐ FAX	E2	Sarr	ne day o	r weeke	nd emer	rgency -	contac	t ALS	to confi	rm TAT	and surd	harge		
Phone;	867-393-4882		Email 1 or Fax	ldoetzel@edynami	cs.com		Spec	ify Dat	e Req	ired fo	or E2,E	or P								
•			Email 2	Emilie.Hamm@go	v.yk.ca															
			Email 3	erik.pit@gov.vk.ca Invoice Di									<u> </u>		quest					
Invoice To	Same as Report To					Indic	ate Filt	ered (F),	Preser	ved (P)	or Filte	red an	d Prese	:rved (F/	P) below	<u>, </u>	_			
	Copy of Invoice with Report	No .	Select Invoice (MAIL MAIL	FAX			Р	Ρ	Р	Р	Ρ	F/P					╛	
Company:	EDI			sjenner@edynami																
Contact:	S Jenner		Email 2	ldoetzel@edynami			. ₹												1	g.
	Project Information		Oil	and Gas Require		nse)	5	S S	<						_					aine
ALS Quote #:	Q55559		Approver ID:		Cost Center:		[높	AN	4-VA						🕺					ti o
Job #:	MOUNT NANSEN 16-Y-0089		GL Account:		Routing Code:		₹.	¥.	CN-T-CFA				1		CALC					of Containers
PO / AFE:			Activity Code:				Ė	\TS	- Z				i		705.0					ž
LSD:			Location:				EC-PCT-VA,PH-PCT-VA	¥	\ ∀				ş	¥					1	Number
ALS Lab Wo	k Order # (lab use only)		ALS Contact:	Contact: Graig-Fleherly Sampler: JM/GR			ALK-PCT-VA,E	ANIONS-ALL-IC-WR,TSS-MAN-WR	CN-WAD-CFA-	CNO-WT	-vA	≰	MET-T-BCMDG-VA	MET-D-BCMDG-VA	IONBALANC-VA,					_
ALS Sample #]	Sample Identification a	nd/or Coordinates	<u> </u>	Date	Time		1 g	SNC	WAC	8	CN-SCN-VA	NH3-F-VA	∄	3	∦					
(lab use only)	(This description will ap	pear on the report)		(dd-mmm-yy)	(hh:mm)	Sample Type	¥	₩.	Š	S	Š	NH3	闄	ME	8					
NOTE OF STREET	WQ-VC-UNN			06 -Dec-16	12:45	Water	R	R	Ŕ	R	Ŕ	R	R	R	R					9
	WQ - DC - DX+1			65 -Dec-16	16:40	Water	R	R	R	R	R	R	R	R	R	\neg		\top		9
	WQ-SEEP			OS -Dec-16	15:15	Water	R	R	R	R	R	R	R	R	R					9
	WO-DC-U			05 -Dec-16	14:50	Water	R	R	R	R	R	R	R	R	R			1	1	9
100000	WQ-TP-C			05 -Dec-16	16:00	Water	R	R	R	R	Ŕ	Ŕ	R	R	R		\top			9
	• • • • • • • • • • • • • • • • • • • •			-Dec-16		Water	R	B	R	<u> </u>	R	R	مجمر	Ŕ	R	,			` · · · ·	9/
a Maria				Dec-16		Water	7	R	×	R	R.	R	R	P	R				∇	9
47.11.20	-													_						
		<u></u>															_			
1100																	Т			
Drinking Water (DW) Samples¹ (client use) Special in			structions / Spec	ify Criteria to add o	n report (client Us	e)	Froze	n _{asid} a		a 🔲 Si	ericht:	CEU.	SIF C	Obser	vation	ıs okY	use or]⊪ No	1000	3.75
	,						Frozen SIF Observations Yes No No Custody seal intact Yes No Cooling initiated													
Are samples for	,								INITIAL COOLER TEMPERATURES °C FINAL COOLER T											
	SHIPMENT RELEASE (client use)		INITIAL SHIPMENT RECEPTION (lab use only)					aligensis r	بذواءن ممالك	FIN.	AL SH						e only)			
Released by:	Marker of Dec	Fime: Receive	elved by: Date: Time: Doc: -01-15 10:51Am					Received by SC Date: 2:05 px												
DECED TO DACK	A DACE FOR ALP LOCATIONS AND CAMBLING	V -	T 12/211	TE LADODATOR	14 C C C C C C C C C C C C C C C C C C C	OLL	CA ICAIS	CODE	,											

Drinking Water.

ALS) Environmental

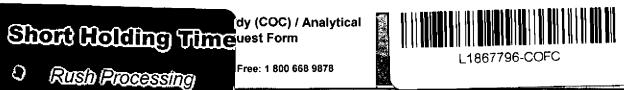
Chain of Custody (COC) / Analytical Request Form

L1867796-COFC

COC Number;

Page 3 of 4

(ALS)	Environmental	Çanada Toi	ll Free: 1 800 (668 9878											1			1	
	www.alsglobal.com																		
Report To				Report Forma	t / Distribution		Select Service Level Below (Rush Turneround Time (TAT) is not available for all tests) L) R												3)
Company:	EDI		Select Report	Format: POF	☑ EXCEL	DD (OIGITAL)	R	✓ Regular	(Standarı	d TAT if r	eceived b	y 3 pm	ı - busir	ness da	ys)				
Contact:	Lyndsay Doetzel		Quality Contro	I (QC) Report with 1	Report 「TYs	s I No		🔲 Prilority (
Address:	2195 - 2nd Avenue		Criteria on Re	port - provide details bei	low if box checked		E	Emerger	cy (1-2 t	ous. days	if receive	d by 3	pm) 10	10% sur	rcharge	≥ - conta	ct ALS t	to confin	m TAT
l.	Whitehorse, YT Y1A 3T8		Select Distribu	tion: EM	AIL MAIL	FAX	E2	Same da	y or wee	kend em	ergency -	contac	1 ALS t	io confi	rm TA1	and su	rcharge		
Phone:	867-393-4882		Email 1 or Fax doetzel@edynamics.com					ly Date Re	equired	for E2	E or P:								
		Émail 2			_														
		Email 3	Analysis Request Indicate Filtered (F), Preserved (P) or Filtered and Preserved (F/P) below																
Invoice To	Same as Report To ✓ Yes	- No		Invoice Distribution				Indicate (Filtered (F), Prese	rved (P) (or Filte							
	Copy of Invaice with Report ✓ Yes	No No	Select Invoice	Distribution:	EMAIL MAIL	FAX							\Box				\top		
Company:	EDI		Email 1 or Fax	sjenner@edynam	ics.com				 					\Box		$\neg \vdash$	\neg		
Contact:	S Jenner		Email 2	idoetzel@edynam			1	1					Ιl	.			1		sy.
-	Project Information		0	il and Gas Require	ed Fields (client	use) Table 37	1					.	Ιl	.					Number of Containers
ALS Quote #:	Q55556		Approver ID 8	ver.ID													E		
Job #:	MOUNT NANSEN 16-Y-0089		GL Account:		Routing Code		1						Ιl	.					స్ట
PO / AFE:			Activity Code	3,873			1					J		1			-		<u>~</u>
LSD:			Location				1 ∉					ı	1	.					Ě
					1	1 -	│								l				₹
ALS Lab Wo	ork Order# (lab use only)		ALS Contact:	Craig Elaherty	Sampler:	MIGR	-ULL-TOT-DW-WR												
ALS Sample #	Sample Identification a	and/or Coordinates		Date	Time	Sample Type	13						Ιl	.	i				
(lab use only)	(This description will ap	pear on the report)		(dd-mmm-yy)	(hh:mm)	campic type	₽.						Ш						
	WQ-PW			ල 💪 - Dec-16	15:55	Water	R						Ιl						3
												\neg	П		Î				
	íl					· ·	1		-	-	\Box		1			_	\neg		
-				+	-	•			-	+ -	 		┌─┤	\longrightarrow	-	-+	\dashv	-	
					+	 	1		-	1		\dashv	 						
				<u> </u>									\square						
	l i												Ιl	.					
														\Box		$\neg \top$			
				1			1						\Box				\dashv	-	
	<u> </u>			+		 	+-	_		+			\vdash					-	
						 		——	+	 -	 			.—∤		_	\dashv		
	<u> </u>		***		_					1			Ш	\sqcup					
					l														
													П		7		\neg		
		0 - 1-11		-15 - 0-21 - 1 - 1 - 1					SAMI	LE CC	NDITIO	N AS	S REC	EIVE	D (la	b use	only)		
I '	g Water (DW) Samples¹ (client use)	Special ii	nstructions / Spe	cify Criteria to add o	on report (client L	150)	Froze	n)				SIF	Obser	vation	18	Yes		No	
Are samples ta	ken from a Regulated DW System?				·		ice pa	cks Ye	s 🗹	(No		Custo	ody st	eal int	act]	Yes:		No	o.
L.	Yes 「No							ng <u>init</u> íateo											
Are samples fo	r human drinking water use?						INIII	IAL COOLE	R.TEMP	ERATUR	ES °C 🏚		F	INAL C	OOLE	R JEMP	ERATI	JRES °C	
ਦਾ	Yes No			3,	ø .		أكرار			أتي			4		3				
	SHIPMENT RELEASE (client use)		INITIAL	INITIAL SHIPMENT_RECEPTION (lab use only)						IPMEN	IT, RE	CEP	TION	(lab u	se onl	y)			
Released by:	Date:	Time: Receive	red by:	Br. Co.	Date:	Times	Rece	ived by:			12		Date	7	7	Time.	a v	- Aven	
Jee				ANT DEC) <u>(</u>			7.1	Ų.	12		JXY.			
REFER TO BAC	K PAGE FOR ALS LOCATIONS AND SAMPLING	INFORMATION		/ WH	IITE - LABORATO	RY COPY TYEL	LOW - (LIENT CO	PY -			_	マップ	NA FM-037	Se VOS Fri	nordi Jenuar	y 2014	•	



COC Number:

Page 4 of 4

	y - wasininoed	<u> </u>																			
Report To				Rep	ort Format	/ Distribution		Solect Service Level Below (Rush Turnaround Time (TAT) is not available for all (ests)												515)	
Company:	EDI		Select Report F	ormat:	✓ POF	√EXCEL □	EDO (DIGITAL)														
Contact:	Lyndsay Doetzel		Quality Control	(QC) R	Report with F	Report I Yes	s F No		_						-		-				
Address:	2195 - 2nd Avenue		Criteria on Repo	ort - prov	vide details bet			E	Em	ergency	(1-2 bu	ış, days	f receive	ed by 3	,pm) 1(30% su	ırcharge	e - conta	nct ALS	to conf	rm TAT
	Whitehorse, YT Y1A 3T8		Select Distribut		☑EMA		FAX	E2	Sar	ne day	or week	end eme	rgency -	conta	ct ALS	to conf	irm TA	T and su	ırchargı	е	
Phone:	867-393-4882		Email 1 or Fax	Idoetze	el@edynam	ics.com		Spec	ify Dat	e Rec	uired f	or E2,	E or P								
			Email 2	Emilie.	.Hamm@go	v.yk.ca						_									
			Email 3 <u>erik.pit@gov.yk.ca</u>												is Rec	<u> </u>					
invoice To	Same as Report To	No	Invoice Distribution					Indi	cate Fili	ered (F)), Preser	ved (P)	or Filte	red an	d Pres	erved (F/P) bel	ow.			
	Copy of Invoice with Report ✓ Yes ✓	▼ Yes 「No Select Invo				Select Invoice Distribution:				Р	Ρ	Р	Р	Р	F/P		į .				
Company:	EDI		Email 1 or Fax	<u>sjenne</u>	r@edynami	ics.com										ΙП	\Box		\neg		
Contact:	S Jenner		Email 2	ldoetze	el@edynami	cs.com		₹						l	!		ıl				£
	Project Information		Oil	and G	as Require	d Fields (client	use)	1	¥		:				!		i l		- 1		Container
ALS Quote #:	Q55559	Approver ID:			Cost Center:		Ť	Ž.	<u>``</u>				1		ا ۲	ıl				ם	
Job #:	MOUNT NANSEN 16-Y-0089		GL Account:			Routing Code:		Ϋ́	¥	S. CF						TDS-CALC-VA	.				ģ Č
PO / AFE:		Activity Code:					7	TS	Ė				İ	!	ပိုင္ပ	.		l			
LSD:			Location:					EC-PCT-VA,PH-PCT-VA	¥	, C				≰	\$				-		Number
ALS Lab Wo	rk Order#!(lab use only)		ALS Contact:	Crai	g -Flahe rty Cc UCI	Sampler: JN	NIGR	ALK-PCT-VA,E	ANIONS-ALL-IC-WR, TSS-MAN-WR	CN-WAD-CFA-VA,CN-T-CFA -VA	WT	 §	_	MET-T-BCMDG-VA	MET-D-8CMDG-VA	ONBALANC-VA,					z
44.0.0	Sample Identification a	nd/or Coordinates	≱ 5.		CC IVCA Date	Time	T	ξ	Ş	Š	CN-CNO-WI	CN-SCN-VA	NH3-F-VA	Ä	<u> </u>	돌	. 1			1	
ALS Sample #	(This description will app		l	-mmm-yy)	(hh:mm)	Sample Type	Ě	잁	ż	Ž	S.	호	量	🚊	胃	ıl					
	1/Q-VC-DBC	ocar on the reporty		06	-Dec-16	10:25	Water	R	R	R	R	R	R	R	R	R	\rightarrow	\rightarrow	\rightarrow	+	
A51458	WG-Field blank			06	-Dec-16	15:36	Water	R	R	R	R	R	R	R	R	R		\dashv		-	9
	WG - TRAVEL BLAN	<u> </u>	<u></u>	06	-Dec-16		Water	R	R	R	R	R	R	R	R	R		-+			9
1,41,41,41,41	WQ - VC-U	<u> </u>		06	-Dec-16	10:45	Water	R	R	R	R	R	R	R	R	R	\dashv	-	+		9
	WQ - VC - R+150			05	-Dec-16	13:05	Water	R	R	R	R	R	R	R	R	R	\dashv	+	\dashv		9
	WG - TP			05	-Dec-16	15:50	Water	R	R	R	- it	R	R	R	R	R		 -	\dashv	-+	9
				7	Dec-18-7	10,70	·	-10		D		· · ·	2.	-				_	_	_}	اجت
111					7	1	2 Water	48	- V					-20			\rightarrow		\dashv		
								ļ				<u> </u>		<u> </u>		 					
															\square			_	\perp		
						<u> </u>						<u> </u>			igsqcut	.					_
																Ш					
a restauration																, [
Drinking	Water (DW) Samples ¹ (client use)	Special In:	structions / Spec	ify Crite	erla to add o	n report (cilent Us	se)	30/302	and a	diine.dalə İ									only)	rati das	ikalik, ukoc
				,			~,	Froze	n j					SIF (Obser.	vation	19	Yes		No.	have \square
	samples taken from a Regulated DW System?							Ice p	acks	Yes	Q_i	No		Cust	ody so	eal int	act	Yes		No	
,								Cooli	ng Init	iated }					地理		Man .	13.		DE LA	South
	human drinking water use?						INITIAL COOLER TEMPERATURES *C.														
ΓΥ							多·拉拉斯 医 4 3 2 1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1														
	SHIPMENT RELEASE (client use)	நார்கள் initial SHIPMENT RECEPTION (lab use only) வரையாக வி						**************************************													
Released by: Marfaze Of Dec. Time: Received				Date: Time: Received by: TC 9Decib 12:						7	0	Maria T									
DECENTAGE	$\mathcal{K} \sim \mathcal{C}_{\mathbb{R}^{2}}(\mathcal{K})$	Now	W INGS D	Dec-01-9	1100190	35.45°	× 40 million	1. 444				<u> </u>	Ш	<u> </u>	שו		400	<u>~ > </u>			