



**ANALYTICAL RESULTS**

**Batch ID/Form:** 2404-01109 - TOTAL COLIFORM RULE

**Submitting Lab ID:** 1015

**PWS ID/Name:** 2545100 - WINDHAM HIGH SCH - WINDHAM

**Report Date:** 04/10/2024

**Collector:** SPENCER CUSSON

**Phone:** 603-641-5767

**Collect Date:** 04/05/2024 12:50:00

**Lab Sample ID:** 2404-01109-002

**Matrix:** WATER

**Received:** 04/06/2024 13:05:00

**Sample Location ID:** 007

**Sample Type:** ROUTINE-SAMPLE

**Compliance Period:** APR 2024

**Description:** NURSES RM A227 SINK

**Receipt Temp.:** 4.1 C

**Batch Chlorine Residual:** 0

Analyte	Results	Units	RDL	DF	Prepared Date	Analysis Date	Analyte Code	Analyst	Qual.
<b>Analytical Method:</b> 9223B		<b>Analyzing Lab:</b> 1015-GRANITE STATE ANALYTICAL SERVICES LLC							
ESCHERICHIA COLI	ABSENT	P-A/100ML			04/06/2024 15:16:00	04/08/2024 08:20:00	2525	10291	
TOTAL COLIFORMS	ABSENT	P-A/100ML			04/06/2024 15:16:00	04/08/2024 08:20:00	2500	10291	
<b>Analytical Method:</b> Field Result THE FIELD MEASUREMENT									
RESIDUAL FREE CHLORINE	ND	MG/L						44	

This report is derived from the original 'Report of Laboratory Analysis' and is not intended as a replacement.