

**Lab. ID #**  
**112930**
**To:** Franklin Health Dept.  
 Attn: Cathleen Liberty  
 355 E. Central St.  
 Franklin, MA 02038

Received Date/Time:	7/3/24, 2:33 PM
Analyzed Date/Time:	7/3/24, 2:55 PM
Reported Date:	7/5/24
Collected by:	Client
Collected Date:	7/3/24

### ANALYTICAL RESULTS

Sample #	Sampling Location	Sampling Time	E. coli (CFU/100mL)	GeoMean
1	Chilson Beach	10:00 AM	<5	
<b>Maximum Contaminant Level</b>			<b>235</b>	<b>126</b>
<b>Method of Reference</b>			<b>EPA 1603</b>	

**Laboratory QC Results**

QC	Unit	E. coli
Duplicate (D1)	100mL	<5
Duplicate (D2)	100mL	<5
Dilution Blk.(Beginning)	100mL	Negative
Dilution Blk.(Ending)	100mL	Negative
Positive Control	100mL	Positive

**Approved By:**


7/5/24

 \_\_\_\_\_  
 Lab. Director

 \_\_\_\_\_  
 Date



