



N00221_003636
MARE ISLAND
SSIC NO. 5090.3.A



Department of Toxic Substances Control



Terry Tamminen
Agency Secretary
Cal/EPA

Edwin F. Lowry, Director
700 Heinz Avenue, Suite 200
Berkeley, California 94710-2721

Arnold Schwarzenegger
Governor

March 4, 2004

Southwest Division
Naval Facilities Engineering Command
Attn: Mr Jerry Dunaway
1220 Pacific Highway
San Diego, California 92132-5190

Dear Mr. Dunaway:

Perchlorate Laboratory Analysis Results of Duplicate Groundwater Sample from Monitoring Well 01W34AN, Mare Island

The Department of Toxic Substances Control Hazardous Materials Laboratory (HML) has completed the laboratory analysis of one duplicate groundwater sample obtained from monitoring well 01W34AN. The duplicate sample was obtained on November 14, 2004 and analyzed for perchlorate. The HML reported a concentration of 210 micrograms per liter of perchlorate, whereas the RCRA/Facility Landfill 2003 Annual Groundwater Monitoring Report dated March 2004 states in Section 4.4.3 that perchlorate was not present in any wells. Copies of the HML report and chain of custody are attached.

DTSC requests that all monitoring wells previously sampled and analyzed for perchlorate be immediately resampled and duplicate samples

Should you have any questions regarding this letter, please call me at (510) 540-3773.

Sincerely,

Chip Gribble
Remedial Project Manager
Base Closure Unit
Office of Military Facilities

cc: Mr. Gary Riley
Ms. Emily Roth

Post-It™ brand fax transmittal memo 7671		# of pages ▶ 12
To	Jerry Dunaway	From
Co.	Naval Facilities Engineering Command	Co.
Dept.		Phone #
Fax #	619-532-0940	Fax #

Attachment

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Department of Toxic Substances Control



Terry Tammlinen
Agency Secretary
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Edwin F. Lowry, Director
700 Heinz Avenue, Suite 200
Berkeley, California 94710-2721



Arnold Schwarzenegger
Governor

TO: Charles Gribble
Hazardous Substances Engineer
Hazardous Waste Management Program, Office of Military Facilities
Berkeley Regional Office

FROM: Norman Shopay, RG *NS*
Senior Engineering Geologist, Northern California Geological Services
Unit, Geology, Permitting and Corrective Action Branch
Berkeley Regional Office

CONCUR: Brian Lewis, CEG, CHG *NS For BL*
Chief, Northern California Geological Services Unit
Geology, Permitting and Corrective Action Branch
Sacramento Regional Office

DATE: March 3, 2004

SUBJECT: Perchlorate Laboratory Analysis Results of Duplicate Groundwater
Sample from Monitoring Well 01W34AN
Mare Island Naval Shipyard
Vallejo, Solano County, California
Project No. 25045/200063-33/46-PER

COMMENTS

The Department of Toxic Substances Control (DTSC) Hazardous Materials Laboratory (HML) has completed the laboratory analysis of one duplicate groundwater sample obtained from monitoring well 01W34AN. The duplicate groundwater sample was obtained on November 14, 2004 and analyzed for perchlorate by Environmental Protection Agency (EPA) Method 314. Laboratory results reported a concentration of 210 micro grams per liter (ug/L) of perchlorate in the duplicate sample. Copies of the HML laboratory report and chain-of-custody form is attached.

DTSC Geological Services Unit (GSU) has received the RCRA/Facility Landfill 2003 Annual Groundwater Monitoring Report, dated March 2004 (2003 Annual Report) prepared by Weston Solutions. The 2003 Annual Report is currently being reviewed by GSU. GSU's initial review of the 2003 Annual Report notes that Section 4.4.3 states

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Mr. Charles Gribble
March 3, 2004
Page 2 of 2

that perchlorate was not present in any wells. However, the duplicate sample analyzed by HML reported significant elevated concentrations of perchlorate from monitoring well 01W34AN. Therefore, GSU recommends that all monitoring wells previously sampled and analyzed for perchlorate be immediately resampled and duplicate samples provide and analyzed by the DTSC HML.

Attachments: Laboratory report and chain-of-custody form

DEPARTMENT OF TOXIC SUBSTANCE CONTROL
 HAZARDOUS MATERIALS LABORATORY - SOUTHERN CALIFORNIA
 1449 W. TEMPLE STREET, LOS ANGELES, CA 90026
 TELEPHONE (213) 580-5796
 580-5797

INDEX

EPA 314 FOR SAMPLE (S) AN00781

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TOTAL PAGES = 6

DEPARTMENT OF TOXIC SUBSTANCE CONTROL
HAZARDOUS MATERIALS LABORATORY - SOUTHERN CALIFORNIA
1449 W. TEMPLE STREET, LOS ANGELES, CA 90026
TELEPHONE (213) 580-5796
580-5797

1

CASE NARRATIVE

1. THIS ANALYTICAL REPORT PACKAGE WAS PREPARED FOR SCL SAMPLE(S) AN00781
SAMPLE AUTHORIZATION NUMBER SCT5252
SAMPLE INCLUDED IN THIS ANALYTICAL BATCH AN00781,AN00859,AN00863,AN00864,AN00872-AN00876
2. SAMPLES WERE COLLECTED ON 11/18/2003 AT MARE ISLAND
3. COLLECTOR'S NAME ON THE SAMPLE ANALYSIS REQUEST FORM IS NORMAN SHOPAY
4. SAMPLES WERE:
RECEIVED ON 12/17/2003 BY HAZARDOUS MATERIALS LABORATORY-SO. CAL
EXTRACTED ON _____ BY EPA METHOD _____
ANALYZED ON 12/23/2003 BY EPA METHOD 314 PERCHLORATE BY ION CHROMATOGRAPHY

DATA PACKAGE WAS COMPLETED ON 1/9/04
5. DURING THE COURSE OF THESE ANALYSES, NO PROBLEM WAS ENCOUNTERED.
6. ~~QC~~ PARAMETERS/INDICATORS WERE WITHIN CONTROL LIMITS.
7. INSTRUMENT INITIAL CALIBRATION & CONTINUING CALIBRATION CRITERIA WERE MET.
8. SAMPLE HOLDING TIME WAS NOT MET.

State of California
California Environmental Protection Agency

Department of Toxic Substances Control
Hazardous Materials Laboratories

SCT 5252

HAZARDOUS MATERIALS SAMPLE ANALYSIS REQUEST		1. Authorization Number <u>AMT 5252</u>		HML No. <u>AN 00781</u>		2. Page 1 of 1	
3. REQUESTOR: <u>Norman Shopay</u>		4. Phone (510) 540-3943		7. TAT Level: (check one)			
ADDRESS (To Receive Results) <u>700 Heinz Avenue, Suite 200</u> <u>Berkeley, CA 94710</u>		6. FAX (510) 540-3937		<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			
8. DATE SAMPLED:		9. Codes (fill in all applicable codes)		* Unit Chief's Signature			
10. ACTIVITY: <input type="checkbox"/> SCD <input type="checkbox"/> SRPD <input type="checkbox"/> CIB <input type="checkbox"/> SMB <input type="checkbox"/> FPB <input type="checkbox"/> SPPT <input type="checkbox"/> Others		a. Office		02			
11. SAMPLING LOCATION		b. INDEX		18040			
a. EPA ID No.		c. PCA		201208-18			
b. Site <u>MARE ISLAND</u>		d. MPC		07			
c. Address		e. SITE		07			
Number Street City ZIP		f. County					
12. SAMPLES:							
a. ID	b. Collector's No.	c. HML No.	d. Type	e. Type	f. Size	g. Field Information	
<u>1</u>	<u>R01WB498</u>	<u>AN00781</u>		<u>PLASTIC</u>	<u>125ml</u>	<u>0 1 W 3 4 A N</u>	
B							
C							
D							
E							
F							
13. ANALYSIS REQUESTED: (X desired analysis and enter I.D.s from 12.a.)							
INORGANIC ANALYSIS				ORGANIC ANALYSIS			
Sample(s) ID				Sample(s) ID			
pH				CL-Pesticides (8081)			
Metals Scan (6010)				OP-Pesticides (8141)			
Metal(s) Specific				PCBs (8082)			
WET				GRO (8015B)			
Cyanides				DRO / Motor Oil / Both (circle one)			
(others, write in)				n-Hexane Extractables (1664)			
(others, write in)				Flash Point (1020)			
TCLP Analysis				VOCs Including BTEX (8260)			
(only if necessary) (do TCLP regardless)				VOCs - LO Level (5035)			
Metals				VOCs - HI Level (5035)			
Mercury				SVOCs (8270)			
Volatiles				PAHs (8270)			
Semivolatiles				<u>Perchlorate</u> <u>A</u>			
(others, write in)				(others, write in)			
14. ANALYSIS OBJECTIVE:							
(check a box)		Waste Characterization		Treatment Standards			
<input checked="" type="checkbox"/>		Drinking H ₂ O Standards (applies to DW only)		<input type="checkbox"/>		Others (contact Lab supervisors first)	
15. DETECTION LIMIT REQUIREMENTS: (specify if known and contact lab)							
16. SUPPLEMENTAL REQUESTS						Initials	
						Date	
17. LAB REMARKS: <u>Assigned on 11/24/03</u>							
18. CHAIN OF CUSTODY:							
a.	<u>Norman Shopay</u>	<u>Norman Shopay, Geologist</u>	<u>11/18/03</u>	<u>11/18/03</u>			
b.	<u>Verde Earle Woodson</u>	<u>VERDE EARLE WOODSON</u>	<u>11/18/03</u>	<u>12/15/03</u>			
c.	<u>Barbara Bush</u>	<u>Barbara Bush Lab Tech</u>	<u>12/17/03</u>				
d.							
Signature(s)		Name(s) / Title (s)		Inclusive Dates of Custody			

DEPARTMENT OF TOXIC SUBSTANCE CONTROL
 HAZARDOUS MATERIALS LABORATORY-SOUTHERN CALIFORNIA
 1449 W. TEMPLE STREET, LOS ANGELES, CA 90026
 TELEPHONE (213) 580-5796

REQUESTER: NORMAN SHOPAY

SCL NO. AN00781

SAMPLE LOCATION: MARE ISLAND

DATE REPORTED: 1/9/04

DATE RECEIVE: 12/17/2003

METHOD(S): EPA METHOD 314 PERCHLORATE BY ION CHROMATOGRAPHY

PERCHLORATE ANALYSIS REPORT

ANALYTE	SCL NO.	AN00781					AN00781					
	COL. NO.	IR01WB					IR01WB					
		498					498					
	MATRIX	Water					Water					
	UNIT	ug/L					ug/L					
	ClO ₄	210					200					

NOTES: ND = NOT DETECTED
 QUANTITATION LIMIT (QL) = (CONCENTRATION OF LOWEST CALIBRATION STANDARD) X (DILUTION FACTOR)

SAMPLE PREPARATION:
Faina Goretsky 01-09-04
 FAINA GORETSKY DATE

ANALYST:
Faina Goretsky 01-09-04
 FAINA GORETSKY DATE

SUPERVISING CHEMIST
Hamik Babian 1-12-04
 HAMIK BABIAN DATE

QUALITY CONTROL (QC) REPORT
DEPARTMENT OF TOXIC SUBSTANCES CONTROL
HAZARDOUS MATERIALS LABORATORY - SOUTHERN CALIFORNIA
1449 WEST TEMPLE STREET, LOS ANGELES, CA 90026
TELEPHONE (213) 580-5796

REQUESTER'S NAME: NORMAN SHOPAY

DATE SAMPLE RECEIVED: 12/17/03

SAMPLING LOCATION: MARE ISLAND

DATE SAMPLE PREPARED: 12/22/2003

DATE SAMPLE ANALYZED: 12/23/03

ANALYTICAL PROCEDURES USED:

EPA METHOD 314 PERCHLORATE BY ION CHROMATOGRAPHY

QC REPORT FOR

- A: METHOD BLANK
- B: METHOD STANDARD RECOVERY
- C: LABORATORY CONTROL SAMPLE (N/A)
- D: SAMPLE DUPLICATE ANALYSIS

COMPOUND	A	B	
	METHOD BLANK UG/L	METHOD STANDARD RECOVERY CONTROL LIMIT	
		%	%
ClO ₄	<5	86	70 - 130

D			
SAMPLE DUPLICATE ANALYSIS			
PERFORMED OI SCL NO.		AN00872	
MATRIX: WATER			
COMPOUND	RUN 1 UG/L	RUN 2 UG/L	RPD %
Perchlorate	ND	ND	

NOTES: ND = NOT DETECTED, NA = NOT APPLICABLE

SAMPLE PREPARATION

ANALYST

SUPERVISOR

Faina Goretsky 01-09-04
 FAINA GORETSKY DATE

Faina Goretsky 01-09-04
 FAINA GORETSKY DATE

Hamik Babian 1-12-04
 HAMIK BABIAN DATE

QUALITY CONTROL (QC) REPORT
 DEPARTMENT OF TOXIC SUBSTANCES CONTROL
 HAZARDOUS MATERIALS LABORATORY - SOUTHERN CALIFORNIA
 1449 WEST TEMPLE STREET, LOS ANGELES, CA 90026
 TELEPHONE (213) 580 - 5796

REQUESTER'S NAME: NORMAN SHOPAY

DATE SAMPLE RECEIVED: 12/17/2003

SAMPLING LOCATION: MARE ISLAND

DATE SAMPLE PREPARED: 12/22/2003

DATE SAMPLE ANALYZED: 12/23/2003

ANALYTICAL PROCEDURES USED:

EPA METHOD 314 PERCHLORATE BY ION CHROMATOGRAPHY

QC REPORT FOR MATRIX SPIKE(MS)/MATRIX SPIKE DUPLICATE(MSD) PERCENT RECOVERY

MATRIX SPIKE PERFORMED ON AN00872
 TYPE OF MATRIX Water
 TYPE OF SPIKE CLO4 S072910-ERA

COMPOUND	AMOUNT OF ANALYTE IN SAMPLE	AMOUNT OF ANALYTE ADDED	MATRIX SPIKE		MATRIX SPIKE DUPLICATE		AVE % REC	CONTROL LIMITS FOR % REC	R % D BETWEEN MSMSD	CONTROL LIMITS FOR RPD
	UG/L	UG/L	AMOUNT RECOVERED	%REC	AMOUNT RECOVERED	%REC				
	UG/L	UG/L	UG/L	%	UG/L	%				
ClO ₄	<5	20	18	87	19	96	92	70 - 130	10	

NOTES: ND = NOT DETECTED, NA = NOT APPLICABLE

SAMPLE PREPARATION

ANALYST

SUPERVISOR

Faina Goretsky 01-09-04
 FAINA GORETSKY DATE

Faina Goretsky 01-09-04
 FAINA GORETSKY DATE

Hamik Babian 1-12-04
 HAMIK BABIAN DATE

AUTHORIZATION REQUEST FORM (ARF)

PART A: (By Requestor - PLEASE PRINT) **TAT Level:**
 (check one) *1 2 3 4

Requestor's Name: Norman Shopay Phone: (510) 540 3943

Region/Unit: GSU Berkeley FAX: (510) 540 3937

BACK-UP REQUESTOR: _____ Phone: (_____) _____

SITE: Mare Island AREA CODE: _____

PART B: Analytical Requests (By Requestor) (Lab uses default methods listed below, ALL other requests please specify)

Inorganic Analysis	Number of Samples/Type			
	Solid	Liquid	Water	Other
pH				
Metals Scan (6010)				
Metal(s) Specific:				
WET				
Cyanides				
(others, write in)				
(others, write in)				
TCLP Analysis ** <input type="checkbox"/> <input type="checkbox"/>				
(see footnotes) (only if necessary) (do TCLP regardless)				
Metals				
Mercury				
Volatiles				
Semivolatiles				
(others, write in)				

Organic Analysis	Number of Samples/Type			
	Solid	Liquid	Water	Other
CL-Pest (8081)				
OP-Pest (8141)				
PCBs (8082)				
GRO (8015B)				
DRO / Motor Oil / Both				
n-Hexane Extractables (1664)				
Flash Point (1020)				
VOCs including BTEX (8260)				
VOCs - LO Level (5035)				
VOCs - HI Level (5035)				
SVOCs (8270)				
PAHs (8270)				
Perchlorate (others, write in)			1	
(others, write in)				

Analysis Objective: Drinking H₂O Standards (applies to DW only) Treatment Standards (specify analytes & level aimed)

(check box) Waste Characterization Others (contact Lab supervisors if needed)

Detection Limit Requirements: (must be shown on SAR also)
(specify & contact Lab supervisors)

Expected Date of Sample Arrival at Lab: 1 1 1 8 0 3

PART C: (By STO - HML)

Authorization Number (AN) H M T 5 2 5 2

Lab to Receive Sample(s) **Name: Hazardous Materials Lab**
Address: 700 Heinz St., Ste. 150
Berkeley, CA 94710

Sample Tracking Officer (STO) J. Garcha Check box if cancelled

Today's Date: 1 1 1 7 0 3 Expiration Date: 1 1 2 5 0 3

TAT Level: *1 = 10-15 days (requires unit chief's signature on SAR) 2 = 16 - 30 days 3 = 31 - 45 days 4 = when possible

**TCLP: If time permits and/or sample matrix type is appropriate Lab may perform a TTLC or screening test on the sample(s) first to determine if TCLP is needed.

PAHs by 8310 (LC) and BTEX by 8021 (GC/PID) may produce lower QLs for some matrices. (See HML user's manual for QL comparisons)

State of California
California Environmental Protection Agency

Department of Toxic Substances Control
Hazardous Materials Laboratories

HAZARDOUS MATERIALS SAMPLE ANALYSIS REQUEST		1. Authorization Number	HML No. To _____ of _____	2. Page _____ of _____																																																	
REQUESTOR: <u>Norman Shopay</u> ADDRESS (To Receive Results) <u>700 Heinz Avenue, Suite 200</u> <u>Berkeley, CA 94710</u>		4. Phone (510) 540 - 3943 6. FAX (510) 540 - 3937	7. TAT Level: (check one) <input type="checkbox"/> *1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 *Unit Chief's Signature _____																																																		
8. DATE SAMPLED: _____ 10. ACTIVITY: <input type="checkbox"/> SCD <input type="checkbox"/> SRPD <input type="checkbox"/> CIB <input type="checkbox"/> SMB <input type="checkbox"/> FPB <input type="checkbox"/> SPPT <input type="checkbox"/> Others		9. Codes (fill in all applicable codes) a. Office: 02 b. INDEX: _____ c. PCA: 18040 d. MPC: _____ e. SITE: 201208+18 f. County: _____																																																			
11. SAMPLING LOCATION a. EPA ID No. _____ b. Site _____ c. Address _____ Number Street City ZIP		12. SAMPLES: <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>a. ID</th> <th>b. Collector's No.</th> <th>c. HML No.</th> <th>d. Type</th> <th>e. Type</th> <th>f. Size</th> <th>g. Field Information</th> </tr> </thead> <tbody> <tr> <td>A</td> <td>I R 0 1 W B 4 9 8</td> <td></td> <td></td> <td></td> <td></td> <td>0 1 W 3 4 A N</td> </tr> <tr><td>B</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>C</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>D</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>E</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>F</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>			a. ID	b. Collector's No.	c. HML No.	d. Type	e. Type	f. Size	g. Field Information	A	I R 0 1 W B 4 9 8					0 1 W 3 4 A N	B							C							D							E							F						
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13. ANALYSIS REQUESTED: (X desired analysis and enter I.D.s from 12.a.)																																																					
INORGANIC ANALYSIS pH _____ Metals Scan (6010) _____ Metal(s) Specific: [] [] [] [] WET _____ Cyanides _____ (others, write in) _____ (others, write in) _____ TCLP Analysis: <input type="checkbox"/> (only if necessary) <input type="checkbox"/> (do TCLP regardless) Metals _____ Mercury _____ Volatiles _____ Semivolatiles _____ (others, write in) _____		ORGANIC ANALYSIS CL-Pesticides (8081) _____ OP-Pesticides (8141) _____ PCBs (8082) _____ G R O (8015B) _____ D R O / Motor Oil / Both (circle one) _____ n-Hexane Extractables (1664) _____ Flash Point (1020) _____ VOCs including BTEX (8260) _____ VOCs - LO Level (5035) _____ VOCs - HI Level (5035) _____ SVOCs (8270) _____ PAHs (8270) _____ Perchlorate _____ (others, write in) _____																																																			
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16. SUPPLEMENTAL REQUESTS: _____ Initials: _____ Date: _____		17. LAB REMARKS: _____																																																			
18. CHAIN OF CUSTODY: <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; border-bottom: 1px solid black;">a. _____</td> <td style="width:35%; border-bottom: 1px solid black; text-align: center;">Norman Shopay, Geologist</td> <td style="width:15%; border-bottom: 1px solid black; text-align: center;">11/18/03</td> <td style="width:15%; border-bottom: 1px solid black; text-align: center;">to 11/18/03</td> <td style="width:10%;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">b. _____</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">c. _____</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">d. _____</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="text-align: center;">Signature(s)</td> <td style="text-align: center;">Name(s) / Title(s)</td> <td colspan="3" style="text-align: center;">Inclusive Dates of Custody</td> </tr> </table>					a. _____	Norman Shopay, Geologist	11/18/03	to 11/18/03		b. _____					c. _____					d. _____					Signature(s)	Name(s) / Title(s)	Inclusive Dates of Custody																										
a. _____	Norman Shopay, Geologist	11/18/03	to 11/18/03																																																		
b. _____																																																					
c. _____																																																					
d. _____																																																					
Signature(s)	Name(s) / Title(s)	Inclusive Dates of Custody																																																			



Chain-of-Custody Form

Project Number: 12826.001.001 0012.35		Project Name: Mare Island H1 Facility/ Q4 RCRA LE Groundwater Monitoring				Request for Analysis							Chain of Custody No.: C&T 11/14/03		
Sampler's (Signature) <i>Susan G. Young</i>														Page 1 of 1	
Field Sample ID	Date	Time	Comp.	Grab	Sample Location (Station ID)	No. of Containers	Perchlorate (P14)								Additional Requirements
IR01WB49B	11/14/03	0910		X	01W34AN	1	X								
<i>S. Young 11/14/03</i>															
Relinquished by: (Signature and affiliation) <i>Susan G. Young WESTON</i>		Date and Time: 11/17/03 0730		Received by: (Signature and affiliation) <i>Debra M. Jones Weston</i>				Date and Time: 11-17-03 0730							
Relinquished by: (Signature and affiliation) <i>Debra M. Jones Weston</i>		Date and Time: 11-18-03 0745		Received by: (Signature and affiliation) <i>Norman Shopay DTSC</i>				Date and Time: 11-18-03 07:45							
Relinquished by: (Signature and affiliation)		Date and Time:		Received by: (Signature and affiliation)				Date and Time:							
Comments, special instructions: SAMPLES IN 5 COOLERS <i>by 11/14/03</i>														For Laboratory Use Only	
P. O. Number: 033298															
Data package: Level III Level IV (circle one)															
Turnaround time: 10 business days															