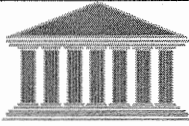


ANALYSIS REPORT

Revision 1

Page 1 of 1



KIRBY MEMORIAL HEALTH CENTER

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

05/22/25

SAMPLE ID #: **AD41878**
SAMPLE DESCRIPTION: **BATHING BEACH**

Email: eusticesteelers@yahoo.com
plpbrowsecretary@yahoo.com
rogan@pobox.com

COLLECTION DATE/TIME: 05/20/25;10:30
SUBMITTAL DATE/TIME: 05/20/25;11:37

RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	23	1	05/21/25	14:27	AE	SM#9223B-QT
Incubation Start	---	---	---	05/20/25	14:20	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

ANALYSIS REPORT

Revision 1

Page 1 of 1



KIRBY MEMORIAL HEALTH CENTER

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

05/30/25

SAMPLE ID #: **AD42021**
SAMPLE DESCRIPTION: **Bathing Beach**

Email: *eusticesteelers@yahoo.com*
plpborosecretary@yahoo.com
rogan@pobox.com

COLLECTION DATE/TIME: 05/27/25;11:30
SUBMITTAL DATE/TIME: 05/27/25;12:23

RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	1	1	05/28/25	14:16	AE	SM#9223B-QT
Incubation Start	---	---	---	05/27/25	14:13	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

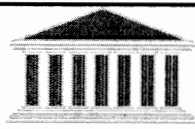
Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

ANALYSIS REPORT

Revision 1

Page 1 of 1



KIRBY MEMORIAL HEALTH CENTER

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

06/09/25

SAMPLE ID #: **AD42162**
SAMPLE DESCRIPTION: **BATHING BEACH**
COLLECTION DATE/TIME: 06/03/25;08:15
SUBMITTAL DATE/TIME: 06/03/25;09:35

Email: *eusticesteelers@yahoo.com*
plpborosecretary@yahoo.com
rogan@pobox.com

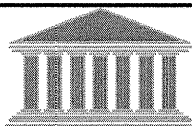
RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	42	1	06/04/25	11:11	JA	SM#9223B-QT
Incubation Start	---	---	---	06/03/25	11:01	JA	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

06/19/25

SAMPLE ID #: **AD42568**SAMPLE DESCRIPTION: **Bathing Beach**Email: *eusticesteelers@yahoo.com**plpbrowsecretary@yahoo.com**coreybeltz@yahoo.com*

COLLECTION DATE/TIME: 06/12/25;10:30

SUBMITTAL DATE/TIME: 06/12/25;11:36

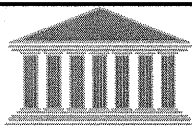
RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	28	1	06/13/25	14:04	AE	SM#9223B-QT
Incubation Start	---	---	---	06/12/25	14:03	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

06/24/25

SAMPLE ID #: **AD42737**
SAMPLE DESCRIPTION: **BATHING BEACH**
COLLECTION DATE/TIME: 06/20/25;08:10
SUBMITTAL DATE/TIME: 06/20/25;10:16

Email: *eusticesteelers@yahoo.com*
plpbrowsecretary@yahoo.com
coreybeltz@yahoo.com

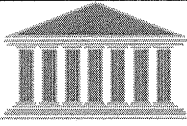
RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	48	1	06/21/25	11:04	JA	SM#9223B-QT
Incubation Start	---	---	---	06/20/25	11:03	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

06/30/25

SAMPLE ID #: **AD42811**
SAMPLE DESCRIPTION: **BATHING BEACH**

Email: eusticesteelers@yahoo.com
plpborosecretary@yahoo.com
coreybeltz@yahoo.com

COLLECTION DATE/TIME: 06/25/25;10:30
SUBMITTAL DATE/TIME: 06/25/25;11:20

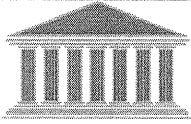
RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	2	1	06/26/25	16:15	AE	SM#9223B-QT
Incubation Start	---	---	---	06/25/25	16:14	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

07/07/25

SAMPLE ID #: **AD42971**

SAMPLE DESCRIPTION: **Bathing Beach**

Email: *eusticesteelers@yahoo.com*

plpborosecretary@yahoo.com

coreybeltz@yahoo.com

COLLECTION DATE/TIME: 07/01/25;08:30

SUBMITTAL DATE/TIME: 07/01/25;09:22

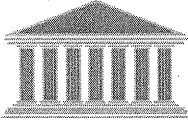
RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	21	1	07/02/25	15:28	AE	SM#9223B-QT
Incubation Start	---	---	---	07/01/25	14:29	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

07/10/25

SAMPLE ID #: **AD43178**
SAMPLE DESCRIPTION: **BATHING BEACH**

Email: *eusticesteelers@yahoo.com*
plpborosecretary@yahoo.com
coreybeltz@yahoo.com

COLLECTION DATE/TIME: 07/07/25;09:00
SUBMITTAL DATE/TIME: 07/07/25;10:00

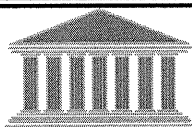
RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	184	1	07/08/25	14:25	AE	SM#9223B-QT
Incubation Start	---	---	---	07/07/25	14:21	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

07/21/25

SAMPLE ID #: **AD43558**SAMPLE DESCRIPTION: **Bathing Beach**

Email: *eusticesteelers@yahoo.com*
plpborosecretary@yahoo.com
coreybeltz@yahoo.com

COLLECTION DATE/TIME: 07/18/25;08:10

SUBMITTAL DATE/TIME: 07/18/25;09:04

RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	205	1	07/19/25	11:11	JA	SM#9223B-QT
Incubation Start	---	---	---	07/18/25	11:10	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

07/28/25

SAMPLE ID #: **AD43597**

SAMPLE DESCRIPTION: **Lake/Pond**

Email: *eusticesteelers@yahoo.com*

plpborosecretary@yahoo.com

coreybeltz@yahoo.com

COLLECTION DATE/TIME: 07/22/25;07:45

SUBMITTAL DATE/TIME: 07/22/25;08:51

RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	46	1	07/23/25	14:30	SJL	SM#9223B-QT
Incubation Start	---	---	---	07/22/25	14:05	SJL	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

08/04/25

SAMPLE ID #: **AD43873**

SAMPLE DESCRIPTION: **Bathing Beach**

Email: eusticesteelers@yahoo.com
plpbrowsecretary@yahoo.com
coreybeltz@yahoo.com

COLLECTION DATE/TIME: 07/31/25;07:10

SUBMITTAL DATE/TIME: 07/31/25;08:45

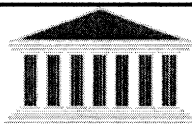
RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	9	1	08/01/25	14:34	AE	SM#9223B-QT
Incubation Start	---	---	---	07/31/25	14:09	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory

**KIRBY MEMORIAL HEALTH CENTER**

71 N. Franklin Street, Wilkes-Barre, PA 18701 (570)823-5450 FAX(570)825-9926 PADEP40115/NYS11801

PENN LAKE PARK BOROUGH
P.O. BOX 14
WHITE HAVEN, PA 18661

08/06/25

SAMPLE ID #: **AD43937**
SAMPLE DESCRIPTION: **BATHING BEACH**
COLLECTION DATE/TIME: 08/04/25;08:45
SUBMITTAL DATE/TIME: 08/04/25;09:45

Email: *eusticesteelers@yahoo.com*
plpborosecretary@yahoo.com
coreybeltz@yahoo.com

RESULTS:

ANALYSIS	UNITS	RESULTS	QUANT LIMIT	DATE ANALYZED	TIME ANALYZED	ANALYST	METHOD
E. coli (QT)	MPN/ 100 ml	6	1	08/05/25	16:05	AE	SM#9223B-QT
Incubation Start	---	---	---	08/04/25	14:13	AE	SM#9223B-QT

This report is subject to the following terms and conditions: 1. This report relates only to the sample as submitted. 2. All sample results and laboratory reports are strictly confidential. Results will not be available to anyone except the invoiced customer unless written authorization is received. 3. The content of this report is for the information of the customer identified above only and it shall not be reprinted, published, or disclosed to any other party except in full. 4. Neither A. E. Kirby Memorial Health Center nor any of its employees shall be responsible or held liable for any claims, loss, or damages arising in consequence of reliance on this report or any default, error, or omission in its preparation or the tests conducted. 5. Test reports and test data are retained 10 years from date of final test report and then disposed of, unless instructed otherwise in writing.

Reviewed, Approved, and Respectfully Submitted by:

Danielle Cappellini, B.Sc., M.H.A.
Director of Laboratory