35186 Kenai Spur Hwy Soldotna, AK 99669 ♥ (907) 262-4624 EngineeringAlaska@gci.net ♥ www.EngineeringAK.com

# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Ken	ai Wasy her	& Forum	Lab Use On Lab Numl		1/61-01	
Mailing	4412	9 Sterling	Hwy	Lab Numi	Dei <u>U</u>		
Address	Soldotna				Phone 715-215-04199		
_				Email/Fax	Maggie OKE	inaiwatershed.	
Sample Int	formation	a: O Residential Water	r System O PWSIE		⊗Other <u></u>	Q az	
Legal Desc	cription://	Building:					
Sample Lo	cation:	(bathroom, kilchen, etc)	rg's Land	ling			
Sampled:		Date: 7/2/20	Time: <u>(a · 32</u>	am By:	DNR/DE	EC	
Sample Ty	rpe:	O Routine	🥱 Special Pur	pose <u>WQ</u>			
		O Check Sample (Fo	or previous unsatisfactory	sample with lab numb	oer	)	
Disinfectio	n:	✓ Untreated ,	•	lorine, UV, etc.) _			
Relinquish	ned:	Date: 7 21 20	Time: <u>11:45 am</u> B	y: Austa En	Fasion		
Received:		Date ZIJULY7070	Time: <u>//45</u> B	y: _ HW	Paid:		
Condition:	:	Satisfactory	O Rejected	Comments:			
	By subm	This report is itting a sample for testing to Tauriainen	for the exclusive use of the party Engineering & Testing, Inc., (TE		ms and conditions on reverse	o	
		1	To be filled out b	y Lab  ↓		-	
Date Test S	Started: 2	151,10	Time Test Started:	1415	Analyst: _	72	
TEST RE	SULTS	(SM 9222D)		Date	Time	Analyst	
Direct Cour	nt: <u> </u>	_ Colonies/100ml		223172	1415	51	
	O Neg	gative for Fecal Coliforn	n \ \ \				
	Pos	sitive for Fecal Colliform	- # Colonies	<b>\</b> 			
	O Sat	isfactory O Unsa	atisfactory				
Comments	:					<del></del>	

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Kena	i Waters	Leas Forces	<b>~</b>		Lab Use Or Lab Num		-076	1161-02
- Mailing	44129	Stevling	:+17.14.4			Lab Num	ber		
Address	Soldi	tha -				Phone _	715-2	215-0	499
_						Email/Fa	xmaggie	@Kena	ii watershee
Sample Inf	ormation	: O Residential	Water System	O PWS	SID		•	_	Ov-2
Legal Desc	ription:/E								
Sample Lo	cation:	(bathroom, kitchen, etc)	Upstrea	in	of	Dow	15/au	<u>&amp;</u>	
Sampled:		Date: 7/2/	ZO Time:	7:49	lan	Ву:	) NR/D	EC	
Sample Ty	pe:	O Routine	≫ sp	ecial P	urpose _	WQ			
		O Check Sam	ole (For previous un	satisfact	ory sample	with lab num	ber		)
Disinfectio	n:	∀ Untreated	O Tr	eated (	chlorine,	UV, etc.) _ 5}- &			<del></del>
Relinquish	ed:	Date: 7/21/20	Time: 🕏	49am	Ву: <u></u> Д	Ster Er	14500		
Received:		Date ZUULY TO	<u> </u>	45	Ву:4	yw_		Paid:	
Condition:		Satisfactory	O Re	ejected	Comn	nents:	<del> </del>		
	By submi	This itting a sample for testing to	s report is for the exclusive of auriainen Engineering & Te	use of the pa	arty to whom it TET) the Clic	t is addressed. ent agrees to the te	rms and condition	ns on reverse.	
			<b>↓</b> To be fil	led out	by Lab	<b>U</b>			
Date Test S	Started: _7	LIJ1720	Time Test	Started	d: 141	15	_ An	nalyst:	57
TEST RE	SULTS (	(SM 9222D)			Dat	te	Time		Analyst
Direct Cour	nt: 26	Colonies/100m	ıl		22	54,20	1415		ST
	O Neg	– gative for Fecal C	oliform						,
	Pos	itive for Fecal Co	liform - # Colonie	es <u> </u>	<u></u>				
	O Sati	isfactory C	<b>Unsatisfactory</b>						
Comments:									
<del></del> .									

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Mailing Hull 9 Sterling Hwy  Soldstra  Phone 75-215-6499  Email/Fax Maggie@ Kerrai wateska  Sample Information: O Residential Water System O PWSID  Legal Description:/Building:  Sample Location: (bathroom, kitchen, etc)  Soldstra  Creek
Soldstra  Phone 715-215-0499  Email/Fax Maggilla Kerni watesu  Sample Information: O Residential Water System O PWSID  Legal Description:/Building:
Sample Information: O Residential Water System O PWSID Ø Other  Other  Other
Sample Information: O Residential Water System O PWSID Ø Other  Other  Other
Sample Location: (hallman likelya ata) SDWitton Canal
Sample Location. (bainroom, kilchen, etc)
Sampled: Date: 7/21/20 Time: 07:50 am By: ADFG KWF
Sample Type: O Routine Special Purpose
O Check Sample (For previous unsatisfactory sample with lab number)
Disinfection: Untreated O Treated (chlorine, UV, etc.)
Relinquished: Date: 7/21/20 Time: 11:45 am By: Austra Eritsson
Received: Date ZNUCY 7000 Time: 1145 By: 4h Paid:
Condition: O Rejected Comments:
This report is for the exclusive use of the party to whom it is addressed.  By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.
∜ To be filled out by Lab ∜
Date Test Started: 21 Jun 700 Time Test Started: 1415 Analyst: 57
TEST RESULTS (SM 9222D) Date Time Analyst
Direct Count: 27 Colonies/100ml 2251/20 1415 57
O Negative for Fecal Coliform
Positive for Fecal Coliform - # Colonies 27
○ Satisfactory ○ Unsatisfactory
Comments:

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## PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name Lu	nai Watershad Form Lab Use Only 2020-1161-84
Mailing ビビ	129 Starling Hou
Address 50	Phone 715-215-6499  Email/Fax Maggie @ Kenai watersha
	Email/Fax maggi & @ Keneri water ha
Sample Informat	ion: O Residential Water System O PWSID Ø Other WQ
Legal Description	n:/Building:
Sample Location	
Sampled:	Date: 7/21/20 Time: 8:00am By: KWF
Sample Type:	O Routine Special Purpose
	O Check Sample (For previous unsatisfactory sample with lab number)
Disinfection:	
Relinquished:	Date: 7/21/20 Time: 11:45am By: A OSTON GREGSON
Received:	Date ZiJV42020 Time: 145 By: 4w Paid:
Condition:	Satisfactory
By s	This report is for the exclusive use of the party to whom it is addressed. submitting a sample for testing to Tauriainen Engincering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.
	∜ To be filled out by Lab ∜
Date Test Started	: 21JU, 20 Time Test Started: 1415 Analyst: LT
TEST RESULT	S (SM 9222D) Date Time Analyst
Direct Count: <u> </u>	7 Colonies/100ml 225/1/20 1415 5/
10	Negative for Fecal Coliform
<b>•</b> F	Positive for Fecal Coliform - # Colonies 4
08	Satisfactory O Unsatisfactory
Comments:	

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### PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION

### Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name <u>\</u>	vai Watersh	ed Forum	Lab Use Only Lab Number 2010-1	161-05	
Mailing 44,2	a Sterling +	twy		1	
Address Suk	totna -		Phone 715-215-0499		
			Email/Faxmaggie@1	cencionaleshed.	
Sample Informatio	n: O Residential Water	System O PWSID	SOther WQ	J. J	
Legal Description:	/Building:				
Sample Location:	(bathroom, kitchen, etc)	suth of Kena	+ Killey River		
Sampled:	Date: 7/21/20	Time: <u>8:08 am</u>	By: ONR/DE	<u> </u>	
Sample Type:	O Routine	Special Purpose	WA		
	O Check Sample (Fo	r previous unsatisfactory sampl	e with lab number	)	
Disinfection:	→ Untreated	O Treated (chlorine ไว้ 45 ลด Time: <del>S ปริเคา</del> By: <u>A</u> ฮ	, UV, etc.)	<del></del>	
Relinquished:	Date: 7/21/20	Time: Solan By: Ac	ista Enilesson		
Received:	Date ZNUYZOZO	Time: <u>//</u> 45 By:	HW Paid:		
Condition:	Satisfactory	O Rejected Com	ments:		
By sub	This report is mitting a sample for testing to Tauriainen	for the exclusive use of the party to whom Engineering & Testing, Inc., (TET) the Cli	it is addressed. ent agrees to the terms and conditions on reverse.	·	
-	1	To be filled out by Lab	<b>)</b> #		
Date Test Started: _	2174720	Time Test Started: 14	Analyst:	57_	
TEST RESULTS		Da	te Time	Analyst	
Direct Count: 9	Colonies/100ml	<u>7</u>	274720 1415		
O Ne	egative for Fecal Coliforn				
<b>●</b> Pc	ositive for Fecal Coliform	- # Colonies 4 +			
O Sa	atisfactory O Unsa	atisfactory			
Comments:					
				<del></del>	

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Ken	en Westershood f	6nm	Lab Use O	nly nber <u>7</u> 070-	1161-06
Mailing	4412	9 Sterling	Hwy	Lub Huii	<u> </u>	
Address	Soldi	tha -		_	715-215-	
				Email/Fa	xmaggie@x	eraux tested
Sample In	formatior	n: O Residential Water	System O PWSID		_ ∜Other <u></u> (∪ (	
Legal Des	cription:/	Building:				
Sample Lo	ocation:	(bathroom, kitchen, etc)	Funy Ri	iver		
Sampled:		Date: 7/2/20	Time: <u>08:30 a</u>	<u>м</u> Ву:	CIAA	
Sample T	уре:	O Routine	Special Purp	ose <u>WW</u>		
		O Check Sample (Fo	r previous unsatisfactory s	sample with lab num	nber	)
Disinfecti	on:	Untreated (	O Treated (chlo	orine, UV, etc.) _		
Relinquis	hed:	Date: 7 21 20	Time: <u>(1:45 a.</u> m By	: Auste Erik	554n	······
Received:	:	Date ZIJULYZOZO	Time: <u>         </u>   By	: <u>#w</u>	Paid:	
Condition	):	Satisfactory	O Rejected 0	Comments:		
	By subm	This report is nitting a sample for testing to Tauriainen	for the exclusive use of the party to Engineering & Testing, Inc., (TET)	whom it is addressed. the Client agrees to the to	erms and conditions on reverse	1.
	_	Ų	To be filled out by	Lab ↓		
	•					
Date Test	Started: _	2151,20	Time Test Started: _	1415	_ Analyst: <u>.</u>	<b>57</b>
TEST RE	ESULTS	(SM 9222D)		Date	Time	Analyst
Direct Cou	<sub>int:</sub> <u>40</u>	Colonies/100ml		22 July 20	> 1415	57
	O Ne	gative for Fecal Coliforn	n .	·		
	Pos	sitive for Fecal Coliform	- # Colonies 40			
			atisfactory			
Comments	s:					

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Lab Use Only Lab Number 2020 - 1161-07
Mailing 니	4129 Sterling How
Address <u>S</u>	dotna - Phone 715-215-0499
	Email/Fax Muggie @ Kevei, watershe
Sample Inform	nation: O Residential Water System O PWSID \( \nabla \text{Other } \overline{\o
Legal Descrip	tion:/Building:
Sample Locati	ion: (bathroom, kitchen, etc) Soldotha Bridge
Sampled:	Date: 7/21/20 Time: 09:30 am By: ADFG/KWF
Sample Type:	O Routine Special Purpose WQ
	O Check Sample (For previous unsatisfactory sample with lab number)
Disinfection:	Untreated O Treated (chlorine, UV, etc.)
Relinquished:	Date: 7/21/20 Time: 11:45 m By: Austra 60: 15500
Received:	Date ZÜÜLYZOLO Time: 1/45 By: 4W Paid:
Condition:	Satisfactory
	This report is for the exclusive use of the party to whom it is addressed.  By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.
	↓ To be filled out by Lab ↓
Data Task Okad	red: 21 J-1720 Time Test Started: 1915 Analyst: 57
	LTS (SM 9222D)  Date Time Analyst
Direct Count: _	<b>,</b>
	O Negative for Fecal Coliform
	Positive for Fecal Coliform - # Colonies
	O Satisfactory O Unsatisfactory
Comments:	

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name		ui Waterstes Fr			b Use Only ab Numbe		1162-01
Mailing	441	29 Sterling	Hwy				
Address	Sold	otna-		PI	hone	715-2150	0499
				Eı	mail/Fax <sub>Y</sub>	naggic@1	Cenaius feis hea
Sample In	formation	n: O Residential Water	System O PWS			©Other	
Legal Des	cription:/	Building:					
Sample Lo	ocation:	(bathroom, kitchen, etc)	vane C	reek			
Sampled:		Date: 7/21/20	Time: <u>8:4</u>	Sam By	<b>/</b> :	KWF	
Sample Ty	ype:	O Routine	Special P	urpose	WQ_		
		O Check Sample (Fo	r previous unsatisfact	ory sample with	h lab numbe	r	)
Disinfection	on:		O Treated (	chlorine, UV	′, etc.)		
Relinquis	hed:	Date: 7/21/20	Time: 11:45am	By: Austo	~ Eriks	Sen	
Received:	<del>.</del>	Date ZUULYZOCC	Time: <u>//45</u>	Ву: _ ₩	V	Paid:	
Condition	:	Satisfactory	<ul><li>Rejected</li></ul>	Commen	ts:		
	By subn	This report is nitting a sample for testing to Tauriainen	for the exclusive use of the p Engineering & Testing, Inc.,	arty to whom it is ad (TET) the Client ag	ldressed. rees to the terms	s and conditions on revers	e.
			To be filled ou				_
Date Test	Started: _	215-60	Time Test Starte	d: <u>1515</u>	5	Analyst: _	57
TEST RE	SULTS	(SM 9222D)		Date		Time	Analyst
Direct Cou	<sub>int:</sub> <u>48</u>	Colonies/100ml		223	5/1720	1212	5 (
	O Ne	gative for Fecal Coliforn	1		·		
	Pos	sitive for Fecal Coliform	-# Colonies <u>Ц</u>	8			
	O Sa	tisfactory O Unsa	atisfactory				
Comments	s:						

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## PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name \ <e\chi_e\circ_i< th=""><th>ai Watershe</th><th>d Forum</th><th>Lab Use</th><th></th><th>-1167-62</th></e\chi_e\circ_i<>	ai Watershe	d Forum	Lab Use		-1167-62
Mailing 441	29 Sterlir		Lab Nu		1102 00
Address Sold	atom -	51100	Phone	# 715-21	5-0499
			Email/l	Fax Maggie	@ Kenziwati
Sample Information	n: ○ Residential Wa	iter System O PW			ω,
Legal Description:/	Building:				
Sample Location:	(bathroom, kitchen, etc)	Skilax L	ake Ou	+frow	
Sampled:	Date: 7/2//2	<u> </u>	15an By:	DNR/DE	<u> </u>
Sample Type:	O Routine	隊 Special I	Purpose <u>(WQ)</u>		<del></del>
	O Check Sample	(For previous unsatisfac		umber	)
Disinfection:	✓ Untreated			)	
Relinquished:	Date: 7/21/20	Time:	By: Austa El	1/45500	
Received:	Date ZNUYZOZ	OTime:	By: HW	Paid:_	
Condition:	Satisfactory	O Rejected	Comments:		
By subn	This reponitting a sample for testing to Tauria	ort is for the exclusive use of the inen Engineering & Testing, Inc.	party to whom it is addressed. , (TET) the Client agrees to the	ne terms and conditions on rever	se.
		<b>↓ To be filled o</b> u			
Date Test Started: _	217/1/20	Time Test Starte	ed: <u>1515</u>	Analyst: _	<b>S</b> 7
TEST RESULTS	(SM 9222D)		Date	Time	Analyst
Direct Count:	Colonies/100ml		22247	70 1515	<u>\$7</u>
<b>p</b> Ne	gative for Fecal Colife		-/		
O Pos	sitive for Fecal Colifor	rm - # Colonies	<u>Ø</u>		
O Sa	tisfactory O Uı	nsatisfactory			
Comments:		<u>-</u>			

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Kenai Watershed Forum	Lab Use Only Lab Number 2070-1162-03
— Mailing	44129 Sterling Hall	Lab Nulliber US (100
Address	Soldotna -	Phone 715-215-0499
		Email/Fax Maggil (a) Klinen westershows
Sample Info	ormation: O Residential Water System O PWSID	YOther WQ
Legal Descr	ription:/Building:	
Sample Loc	cation: (bathroom, kitchen, etc) No Name Cree	x-DUP
Sampled:	Date: 7/21/20 Time: 9.00 am	By: KWF
Sample Typ	pe: ○ Routine Special Purpose	WQ
	O Check Sample (For previous unsatisfactory samp	le with lab number)
Disinfection	n:   Untreated   Treated (chloring	e, UV, etc.)
Relinquishe	ed: Date: 7-21-20 Time: 11:45am By: A	ta Austa Friksson
Received:	Date 2/10/4020 Time: 1/45 By:	HW Paid:
Condition:	Satisfactory O Rejected Com	nments:
	This report is for the exclusive use of the party to whom By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the C	
	↓ To be filled out by Lal	b
Date Test St	tarted: <u>21ブルル</u> Time Test Started: <u>(5</u>	15 Analyst:
TEST RES	SULTS (SM 9222D) Da	ate Time Analyst
Direct Count	t: <u>33</u> Colonies/100ml <u>2</u>	151 os photos
	O Negative for Fecal Coliform	
	Positive for Fecal Coliform - # Colonies 33	
	O Satisfactory O Unsatisfactory	
Comments:		

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### PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION

### Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name Ken	lai Watersh	ed Form	Lab Uso	e Only ZOZO-	- 116704
Mailing 4412	9 Sterling H	huy	Lap N	umber <u>00</u>	1(00
Address Solds	tra-	<del></del>	Phone	715-215	-0499
			Email	Fax Maggio (	perai was
Sample Informatio	n: O Residential Wate	er System O PW		- ·	
Legal Description:					
Sample Location:	(bathroom, kitchen, etc)	enaila	ce Brio	iae	
Sampled:	Date: 7/21/20	Time: <u>9:00</u>	) am By:	USFS	
Sample Type:	O Routine	🛭 Special F	Purpose <u>W</u>		
	O Check Sample (F	or previous unsatisfact	ory sample with lab	number	)
Disinfection:		•	1	c.)	<del></del>
Relinquished:	Date: 7/2/20	_ Time: <u>1:15 β</u> Μ	By: Austen	Eriksson	
Received:	Date ZLJO 17020	Time:	By: Lhal	Paid:	
Condition:	Q Satisfactory	O Rejected	Comments: _		
By sub	This report mitting a sample for testing to Tauriain	is for the exclusive use of the pen Engineering & Testing, Inc.,	arty to whom it is addressed (TET) the Client agrees to	d. the terms and conditions on revers	e
		<b>↓</b> To be filled ou	t by Lab  ↓		
Date Test Started: _	217-1,20	Time Test Starte	d: [5]5	Analyst: _	S7
TEST RESULTS	S (SM 9222D)		Date	Time	Analyst
Direct Count:	Colonies/100ml		22 Ju	,20 1515	ST
	egative for Fecal Colifor		-/	t	
O Po	sitive for Fecal Coliforn	n - # Colonies	<b>&amp;</b>		
		satisfactory			
Comments:	WITH				
				***	

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Ken	ai Watershood F	orm_	Lab Use Or	hly ber <u>2070</u> -	1163-01
Mailing	-	29 Sterling		Lab Nulli		
Address	Soldi	otra -			715-215-	
				Email/Fa	x maggie @ 1	ceneriosetes has
Sample In	nformation	a: O Residential Wate	r System O PWS	SID	%Other _ W(	
Legal Des	scription:/l	Building:				
Sample L	ocation:	(bathroom, kilchen, etc)	ninghan	n Park		
Sampled:		Date: 7/21/20	_ Time: <u>1 . 2</u>	<u>0</u> ам Ву:	US FWS	
Sample T	уре:	O Routine	🏸 Special Po	urpose <u>WQ</u>		
		O Check Sample (Fo	or previous unsatisfacto	ory sample with lab num	ber	)
Disinfecti	on:	,	•	chlorine, UV, etc.)		<del></del>
Relinquis	hed:	Date: 7/21/20				
Received:	:	Date ZNULYZOZO	Time:_/ <u>/</u> 3/5	By: <u>ifw</u>	Paid:	
Condition	):	Satisfactory	O Rejected	Comments:		
	By subm	This report is nitting a sample for testing to Tauriainer	for the exclusive use of the pan Engineering & Testing, Inc., (	arty to whom it is addressed. TET) the Client agrees to the te	rms and conditions on revers	e
		,	To be filled out	by Lab ↓		
	7	11711 20		. [[ .a.\		57
		2174720	Time Test Started		. Analyst: _	<u></u>
		(SM 9222D)		Date	Time	Analyst
Direct Cou	ınt: <u>49</u>	_ Colonies/100ml		(L) 17 W	1600	
	•	gative for Fecal Coliforr				
		sitive for Fecal Coliform		<u> </u>		
		•	atisfactory			
Comments	s:					

35186 Kenai Spur Hwy Soldotna, AK 99669 O (907) 262-4624 EngineeringAlaska@gci.net O www.EngineeringAK.com

## PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name KMM	is Watershed	Facum	Lab Use O	nly 7070-	1163-02
Mailing リビィ	29 SVAin	the six	Lab Num	ber Coco	<u> </u>
Address Sold	the -		Phone _	715-215	-0499
			Email/Fa	xmaggie@	<u>kenaiwateoled</u>
Sample Informatio	n: O Residential Wat	er System O PWSID _		3.0	
				_	<del>-X</del>
Legal Description:		0.5			
Sample Location:	, i		er_		
Sampled:	Date: 子に 20			USFS	
Sample Type:	O Routine	X Special Purpo	se $WU$	) 	
	O Check Sample (	For previous unsatisfactory sa	mple with lab num	ber	)
Disinfection:	🔉 Untreated	<ul><li>Treated (chlor</li></ul>			
Relinquished:	Date: 7/2/20	Time: <u>Ι΄, Κ</u> ΑΜ Βy:_	Austen Eri	iksso~	
Received:	Date ZNULY70Z	<u>0</u> Time: <u>[ 3(5</u> By:	Hw_	Paid:	
Condition:	Satisfactory	O Rejected Co	omments:		
By sub	This report	t is for the exclusive use of the party to w nen Engineering & Testing, Inc., (TET) the	whom it is addressed. he Client agrees to the to	erms and conditions on reverse	<b>e</b> .
		<b>♯</b> To be filled out by I			
Date Test Started: _	217,1,20	Time Test Started:	1600	_ Analyst: _	57
TEST RESULTS	(SM 9222D)		Date	Time	Analyst
Direct Count: 19	Colonies/100ml		227-17	20 1600	51
 ○ Ne	egative for Fecal Colifo	rm	•		
● Po	sitive for Fecal Coliforn	m - # Colonies 19			
O Sa	atisfactory O Un	satisfactory			
Comments:		· 			
<u></u>					

35186 Kenai Spur Hwy Soldotna, AK 99669 ◯ (907) 262-4624 EngineeringAlaska@gci.net ◯ www.EngineeringAK.com

# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Name _	Kene	ei Watershed	Form	Lab Use C	only nber 2070-	-1163-03
Mailing	441	29 Sterling	Hwy	Lab Ital	inder <u>O = e</u>	
Address —	Solde	stra-		Phone	715-215-0	499
_				Email/F	ax mag; je@	Keveiwateshoo
Sample Info	ormation	: O Residential Water	System OPW	SID	_ Dother _ U	)Q
Legal Desci	ription:/E					<b></b>
Sample Loc	cation:	(bathroom, kitchen, etc) S	LOK Cr	eck		
Sampled:		Date: 712/20	Time: <u>09: 4</u> :	<u>5 am</u> By:	ADFG	LUF
Sample Typ	pe:	O Routine	✓ Special F	Purpose <u>(UQ</u>		
		O Check Sample (For	previous unsatisfact	tory sample with lab nui	mber	)
Disinfection	n:	♥ Untreated ,		(chlorine, UV, etc.)	*	
Relinquishe	ed:	Date: 7/2/20	Time: 11:45 an	. By: Asten Er	iksson	
Received:		Date ZJUY ZOZO	Time:	By: HW	Paid:_	
Condition:		Satisfactory	O Rejected	Comments:		
	By submi	This report is fi itting a sample for testing to Tauriainen		party to whom it is addressed. (TET) the Client agrees to the	terms and conditions on reve	erse
		1	To be filled ou	t by Lab  ∜		
Date Test S	tarted:	2(July 20	Time Test Starte	d: [600	Analyst:	57
TEST RES	SULTS (	(SM 9222D)		Date	Time	Analyst
Direct Count	t: <u>77</u>	_ Colonies/100ml		227472	000/	
	O Neg	ative for Fecal Coliform	٠			
	<ul><li>Pos</li></ul>	itive for Fecal Coliform	-# Colonies	7		
			tisfactory			
Comments:						

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## PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Kene	i Watershee	Forum	Lab Use Lab Nu		-(164-01
Mailing		ed Sterling H		Lab Nu		
Address	Soldo	the -		Phone	715-215-	0499
				Email/F	-axMuggje@k	enai watershed
Sample Ir	nformatio	n: O Residential Wate	r System O PWS		_ ⊠Other <u>W</u>	Q org
Legal Des	scription:/	/Building:				
Sample L	ocation:	(bathroom, kitchen, etc)	organ's	Landi	79	
Sampled: Date: 7/21/20 Time: 69:45 am By: (187)						
Sample T	ype:	O Routine	Special P	ourpose <u></u>	Q	
		O Check Sample (Fo	or previous unsatisfact	ory sample with lab no	umber	
Disinfecti	ion:	✓ Untreated	O Treated (	chlorine, UV, etc.)		
Relinquis	hed:	Date: 7/21/20	Time: <u>11:45am</u>	By: Asota Eñ	k560^	
Received	<b>:</b>	Date ZNULY2020	Time: <u>//4</u> 5	By: #w	Paid:_	
Condition	ı:	Satisfactory	O Rejected	Comments:		
	By subr	This report is mitting a sample for testing to Tauriainer	for the exclusive use of the page Engineering & Testing, Inc.,		e terms and conditions on reven	se.
			To be filled out	t by Lab ↓		
Date Test	Started:	217-1720	Time Test Starte	d: 1645	Analyst:	57
		(SM 9222D)	•	Date	Time	Analyst
	ınt: 15	•		527h	1645	SŤ
		— gative for Fecal Coliforr	n			
		sitive for Fecal Coliform	i de	>		
			atisfactory			
Comments			-			

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## PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Kerri	i Watershed	Forum	Lab Us	e Only umber 2070-	1164-02
Mailing	4412	9 Sterlino	Hwy	Lab N	umber <u>v v v</u>	
Address		to two -	, , , , ,	Phone	715-215	-0499
				Email	/Fax Maggie@k	cenai
Sample In	nformation	n: O Residential Wa	ter System O PW	SID	≫Other <u>ω</u>	ws hear org
Legal Des	cription://					
Sample Lo	Sample Location: (bathroom, kitchen, etc) Muyan'S Landing - Dup					
Sampled:		Date: 7/21/20	Time: 09:4	15 am By:	JUAA	
Sample Ty	ype:	O Routine		Purpose <u>()</u>	<u>.</u>	
		O Check Sample	(For previous unsatisfact	tory sample with lab i	number	)
Disinfection	on:	Untreated ,	O Treated (	(chlorine, UV, etc	:.)	
Relinquis	hed:	Date: 7/21/20	Time: <u>   1:45 a</u> m	By: AUSta E.	rikssun	
Received:	•	Date ZNUY 7076	Time:	By: Hw	Paid:	
Condition	:	Satisfactory	O Rejected	Comments: _		
	By subm	This repo	rt is for the exclusive use of the pinen Engineering & Testing, Inc.,			<b>e</b> .
			<b>↓</b> To be filled ou	t by Lab ↓		
Date Test	Started: 2	174720	Time Test Starte	d: (645	Analyst: _	57
TEST RE	ESULTS	(SM 9222D)		Date	Time	Analyst
Direct Cou	nt: <u>9</u>	_ Colonies/100ml		5527	,20 1645	ST
	O Neg	gative for Fecal Colifo	orm	_	•	
	Pos	sitive for Fecal Colifor	rm - # Colonies	1		
	O Sat	isfactory O Ur	nsatisfactory			
Comments	s:					

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## PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name Lina	ai Watersher	& Farm	Lab Use C	only 2000-	111.4-03
Mailing 441	29 Stening		Lab Nur	mber ZXCV	
Address 501	detra -	<i>110</i> 9	Phone	715-215-	-0499
			Email/F	axmaggie (	Keneir
Sample Informati	ion: O Residential Wat	er System OPW	SID	_ ∕Ø'Other <u>W</u> (	)
Legal Description	n:/Building: Jon	eav			
Sample Location	(bathroom, kitchen, etc)	Junary	Creek		
Sampled:	Date: <u>7/21/20</u>	Time: <u>9:Ч:</u>	<u>Sam</u> ву:	USFS	
Sample Type:	O Routine	✓ Special F	Purpose <b>J</b>		
	O Check Sample (		•		)
Disinfection:	Untreated .	O Treated	(chlorine, UV, etc.)		<del></del>
Relinquished:	Date: 7721 20	Time: <u>1:16 PM</u>	By: Austen E	riksson	
Received:	Date ZUUY700	C Time: 1315	By: HW	Paid:	
Condition:	Satisfactory	O Rejected	Comments:		
Bys	This reportubility a sample for testing to Tauriain	is for the exclusive use of the nen Engineering & Testing, Inc.	party to whom it is addressed. , (TET) the Client agrees to the	terms and conditions on reverse	ı.
		↓ To be filled out			<del>, , , , , , , , , , , , , , , , , , , </del>
Date Test Started:	2174720	Time Test Starte	ed: 1645	Analyst: _	57
TEST RESULT	S (SM 9222D)		Date	Time	Analyst
Direct Count:	Colonies/100ml		-12 <u>TJJ-</u>	170 1645	57
10	Negative for Fecal Colifo	rm	,		
F	Positive for Fecal Colifor	m - # Colonies <u>(</u>	2		
08	Satisfactory O Un	satisfactory			
Comments:					
		·			

35186 Kenai Spur Hwy Soldotna, AK 99669 ○ (907) 262-4624 EngineeringAlaska@gci.net ○ www.EngineeringAK.com

# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Ken	ai Watershed	Form	Lab Use	Only umber <u>7070</u> -	-1164-04
 Mailing	441	a, Watershed , 29 Sterling t	two	Lab No	Alliber 7000	
Address _	_	utna-	<del> </del>		715-215-	
				Email/	Fax Muggie@F	cnaiwatershoot.
Sample Info	ormation	: O Residential Wate	er System O PW			
Legal Desc	ription:/l	Building:			, 	
Sample Loc	cation:	(bathroom, kitchen, etc)	aver Co	eek		
Sampled:		Date: 7/21/20	Time: 10:07	hm By:	USFW	
Sample Typ	oe:	O Routine	🦃 Special P	Purpose <u>VQ</u>		
		O Check Sample (F	or previous unsatisfact	tory sample with lab n	umber	)
Disinfection	n:	✓ Untreated	O Treated (	chlorine, UV, etc.	)	
Relinquish	ed:	Date: $\frac{7}{21/20}$	Time: 1:15 PM	By: Auster E	riteson	
Received:		Date <u> </u>	_ Time:_/3/5	By: Hw	Paid:_	
Condition:		Satisfactory	O Rejected	Comments:		
	By subm	This report itting a sample for testing to Tauriaine	is for the exclusive use of the pen Engineering & Testing, Inc.,			erse.
•			↓ To be filled out			
Date Test S	tarted: 2	2174720	Time Test Starte	d: [645	Analyst:	72
TEST RES	SULTS	(SM 9222D)		Date	Time	Analyst
Direct Coun	t: 960	Colonies/100ml		22 July 2	0 1645	ST
		– gative for Fecal Colifor	m			
	Pos	sitive for Fecal Coliforn	n - # Colonies <u>¶</u> (			
	○ Sat	isfactory O Uns	satisfactory	-		
Comments:	Plate	too numerous to	cont- 11cm	estimate con	nt care out	60 %

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### PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice

### Test Requires Advance Notice Please Call Prior to Bringing in Sample

#### FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER Client Name Lab Number Mailing **Address** Sample Information: O Residential Water System O PWSID Legal Description:/Building: Sample Location: (bathroom, kitchen, etc) Time: 10:09 am Sampled: Special Purpose (1) Sample Type: O Routine O Check Sample (For previous unsatisfactory sample with lab number 🗭 Untreated O Treated (chlorine, UV, etc.) Disinfection: Time: 1:15 PM BV: AUSTEN EN Date: 7/211 Relinquished: Received: Time: 1315 Paid: Condition: Satisfactory O Rejected Comments: This report is for the exclusive use of the party to whom it is addressed. By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse. ↓ To be filled out by Lab ↓ Time Test Started: **TEST RESULTS (SM 9222D)** Time Direct Count: 5 Colonies/100ml O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies O Satisfactory O Unsatisfactory Comments:

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Name	Klr	rai Waternas	Forum	Lab Use C <b>Lab N</b> un		1165-02
Mailing Address	HHI Sold	29 Sterling	Hwy	Phone	715-215	-0499
_				Email/Fa	ex maggie@ke	enai watersho
Sample Info	rmation	: O Residential Wate	r System O PW		_ X Other _ <u>(W(</u>	~
Legal Descr	ription:/l	Building:				
Sample Loc	ation:	(bathroom, kitchen, etc) Su	liftwater	Park		
Sampled:		Date: 7/21/20	Time: <u>iD: 3</u>	Dam By:	ADFO/K	LWF
Sample Typ	e:	O Routine		Purpose <u>WQ</u>		
		O Check Sample (Fo	or previous unsatisfac	tory sample with lab nur	nber	)
Disinfection	):	Untreated .	O Treated (	(chlorine, UV, etc.)		
Relinquishe	ed:	Date: $\frac{7}{2}/2_0$	Time: <u>_11:45_a.m</u>	By: Auston En	iksson	-
Received:		Date ZIJULY COC	_ Time:_ <i>1145</i> _	By:	Paid:	
Condition:		Satisfactory	O Rejected	Comments:		
	By subm	This report is itting a sample for testing to Tauriaine	for the exclusive use of the particles for the p	party to whom it is addressed.  (TET) the Client agrees to the t	erms and conditions on revers	е.
			<b>↓</b> To be filled ou	t by Lab  ↓		
Date Test Sta	arted: 1	131720	Time Test Starte	d: 1725	_ Analyst: _	S7
TEST RES	ULTS	(SM 9222D)		Date	Time	Analyst
Direct Count:	0]	_ Colonies/100ml		227-177	0 1775	ST
	O Neg	gative for Fecal Coliforr	n .	•		
	Pos	sitive for Fecal Coliform	-# Colonies	0		
	O Sat	isfactory O Uns	atisfactory			
Comments: _						
	<u> </u>					

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## PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Name Kun	ai Watershed f	wan_	Lab Use Only Lab Number	-1165-03
Mailing 441. Address	ai Watershed for 29 Sterling How	1	Phone 715-2	
	ong -		Email/Fax Magjic	@ Keneiwatershed way
Sample Information	n: O Residential Water	r System O PWSID _	Other _	WQ
Legal Description:	/Building:			
Sample Location:	(bathroom, kitchen, etc)	enai Rive	V (RM 10.1)*	
Sampled:	Date: 7/21/20	_ Time: <u>10-35 a</u> ~	<u>.</u> ву: <u>USF</u>	<u>uS</u>
Sample Type:	O Routine	🔊 Special Purpo	se <u>WQ</u>	
	O Check Sample (Fo	or previous unsatisfactory sa	ample with lab number	)
Disinfection:	Ø Untreated		rine, UV, etc.)	
Relinquished:	Date: 7/21/20	Time: <u>1∶ℓS P</u> M_By: <u>,</u>	Austa Eniksson	
Received:	Date 7110677060	Time: 13/5 By:	Pa	nid:
Condition:	Satisfactory	O Rejected C	omments:	
By subr		for the exclusive use of the party to verification for the exclusive use of the party to verification.	whom it is addressed. he Client agrees to the terms and conditions o	n reverse.
	1	To be filled out by	Lab ↓	
Date Test Started: _	2131720	Time Test Started:	775 Anal	yst: $\overline{\sum}$
TEST RESULTS	(SM 9222D)		Date Time	Analyst
Direct Count: 9	Colonies/100ml		227-120 1725	
O Ne	gative for Fecal Coliforn	n Q	•	
Po	sitive for Fecal Coliform	- # Colonies		
O Sa	tisfactory O Unsa	atisfactory		
Comments: <b>⊀</b> ₩₩	transferred from	Sample Cont	2 hr	

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client Name	Ken	in water hea	Freun_	Lab Use C Lab Nur	Only 2070-1	166-01
Mailing	ИИ	29 Sterling	Hay	Lab Nui	ilbei <u>Cas Ca</u>	
Address	Sold	otra	<del></del>	Phone	715-215-	0499
				Email/Fa	axinaggic@K	ena. watershed
Sample In	nformatio	n: O Residential Wate	r System O PWS	ID	_ Ø Other <u>W</u>	enailuateished over
Legal Des	scription:/	/Building:				
Sample L	ocation:	(bathroom, kitchen, etc)	ouse Riv	ev		
Sampled:		Date: 7/1/20	Time: 10:40	am By:	CIAA	
Sample T	ype:	O Routine	💢 Special Ρι	urpose	)	<del></del>
		O Check Sample (Fo	or previous unsatisfacto	ry sample with lab nur	nber	)
Disinfecti	ion:	Untreated	O Treated (c	chlorine, UV, etc.)		
Relinquis	hed:	Date: 7/21/20	Time: <u>  :45 cm</u>	By: Austen En	KSSUA	· · · · · · · · · · · · · · · · · · ·
Received	<i>:</i>	Date <u>ZNU47070</u>	Time:	By: HW	Paid:	
Condition	ı:	Satisfactory	O Rejected	Comments:		
	By subr	This report is mitting a sample for testing to Tauriainer	s for the exclusive use of the pan in Engineering & Testing, Inc., (1		terms and conditions on reverse	
			<b>↓</b> To be filled out	by Lab ↓		
Data Toot	Ctortod:	ひりか	Time Test Started	: (875	Analyst:	7
	_	•	Time Test Started			AI4
	$\sim$	(SM 9222D)		Date ファイル <b>コ</b>	Time ~ し欠し5	Analyst
Direct Cou		<b>—</b>		<u> </u>	1863	
		gative for Fecal Coliforn				
		sitive for Fecal Coliform	·			
0 .		•	atisfactory			
Comments	s:		<del></del>	<del></del>		
			<del></del>			

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# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Client K	enci Watershes Farm	Lab Use Only Lab Number 2020 - 1166-02
Mailing L	14129 Sterling Hwy	Lab Number 1000 (100
Address	Soldotna -	Phone 715-215-04199
		Email/Fax maggie@kenaiwasershed
Sample Inform	mation: O Residential Water System O PWSID	// 1 / /
Legal Descrip	otion:/Building:	
Sample Locat	tion: (bathroom, kitchen, etc)	
Sampled:	Date: 7/21/20 Time: 10:55am	ву: <u>USFW</u>
Sample Type:	· ,	Wa
	O Check Sample (For previous unsatisfactory samp	ole with lab number)
Disinfection:		e, UV, etc.)
Relinquished:	: Date: 7/21/20 Time: 136PM By: A.	usta Eriksson
Received:	Date <u>ZPUY7020</u> Time: <u>/3/5</u> By: <u>&amp;</u>	Paid:
Condition:	Satisfactory O Rejected Com	nments:
	This report is for the exclusive use of the party to whon By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the C	
	↓ To be filled out by La	
Date Test Start	rted: _ 2 (づり)つ Time Test Started: _ し	375 Analyst:
TEST RESU	JLTS (SM 9222D)	ate Time Analyst
Direct Count: _	O Colonies/100ml	27-1,70 1825 51
	O Negative for Fecal Coliform	•
,	● Positive for Fecal Coliform - # Colonies	
1	O Satisfactory O Unsatisfactory	
Comments:		

35186 Kenai Spur Hwy Soldotna, AK 99669 ○ (907) 262-4624 EngineeringAlaska@gci.net O www.EngineeringAK.com

# PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires Advance Notice Please Call Prior to Bringing in Sample

Name	Kenai Watershed Form Lab Use Only 20020-1166-03
Mailing	44129 Sterling Hwy
Address	Soldotree- Phone 715-215-0499
_	Email/Fax Maggie @ Kenai watershe
Sample Info	formation: O Residential Water System O PWSID Oxother ( ) O
-	
•	eription:/Building:
Sample Loc	
Sampled:	Date: 7/21/20 Time: (1:20 am By: US 700
Sample Typ	
	O Check Sample (For previous unsatisfactory sample with lab number)
Disinfection	
Relinquishe	ed: Date: 7/21/20 Time: CISPM By: Auston Erikson
Received:	Date_ <u>Z/J0/470ኛo</u> Time: <u>_/3/5</u> By: Paid:
Condition:	Satisfactory O Rejected Comments:
	This report is for the exclusive use of the party to whom it is addressed.  By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.
	<b>♯</b> To be filled out by Lab <b>‡</b>
Date Test St	started: 21Ji/20 Time Test Started: 1825 Analyst: 57
	SULTS (SM 9222D) Date Time Analyst
	t: $\frac{5}{2234720}$ Colonies/100ml $\frac{2234720}{825}$
Direct Count	O Negative for Fecal Coliform
	Positive for Fecal Coliform - # Colonies
	<del></del>
Commonto	· · · · · · · · · · · · · · · · · · ·
Comments:	