A THE COM VIEW		M	Environmental Scienc Microbiology Certificate of Analys		Phone: 919-733-7308 Fax: 919-715-8611		
Report to: Doug Whitmire				Name of System:			
WINSTON SAL 450 WEST HANES Winston Salem, N	MILL RD STE 300			F	all Cree	k Bapt	tist Church
EIN: 566000372X		Delivery: NC	Delivery: NC Courier				Yadkin County
StarLiMS ID: ES2	30921-0060	Date Collected: Date Received:	09/20/2023 09/21/2023	Time Collected: Time Received:	11:11 08:58	By: By:	Doug Whitmire Julie Schiavone
Water System ID: Facility ID:	02-99-426	System Type:		Water Source: Sample Type:	Specia	l/Non-C	ompliance
Sample Location: Disinfectant Used:	FH Women's RR	Location Type: Free Chlorine:	0.00 mg/L	Location Code: Total Chlorine:	WR1		
Comments:	disinfectant used:	none					
PWS - Colilert Pro	file				Method: SM 9223B		
Analyte Test		Test Result	Unit	Conclusion	Date Tested		
Total Coliform E. coli	Absent Absent				09/21/2023 09/21/2023		

North Carolina State Laboratory of Public Health

**Report Date:** 

09/22/2023

**Reported By: KPLEMMONS** 

## **Explanations of Coliform Analysis:**

If coliform bacteria are Absent, the water is considered safe for drinking purpose. If coliform bacteria are Present, the water is considered unsafe for drinking purpose. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

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