Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

ID #	Sample Location	pH	Alk	PO4	other	Y/N
	500 SE Butler Rd	8.28				Y
	700 SE Francis Ave	8.71				Y
	4800 SE Welch Rd	8.56				Y
	1000 SE Larch Ln	8.79				Y
	1400 NE Hacienda Ct	8.50				Y
	1200 NE 25th St	8.67				Y
	500 NE Hood Ave	8.90				Y
	1700 NW 13th St	8.75				Y
	1500 SW Lillyben Ave	8.94				Y
	2600 SW Linneman Dr	9.08				Y

(N = No = Excursion) **Total N's** 0

<Has sample met the minimums?

DISTRIBUTION

PWS ID: 41 00357

System Name: City of Gresham

Sample Period: August 2025
Month/Year

Sample Frequency: Every 6 months

Distribution Samples required: 10

Number of excursions during this Sample Period = 0

(Number of locations when any WQP was less than the minimum.)

Note: Entry Point and Distribution Excursions are cumulative. Add Entry Point and Distribution Excursions to get total for sample period.

For OHA use only

Minimum Water Quality Parameters as set by

pH 7.5

Print Name: Ky Donahoo

Signature: _____

Date: 8-13-2025

Send to Drinking Water Program within 10 days after end of sampling period:
OHA Drinking Water Program, PO Box 14350, Portland, OR 97293-0350
Phone (971) 673-0405 Website: http://healthoregon.org/dwp/