

ID #	Sample Location	pH	Alk	PO4	other	Y/N
3		8.5				Y
11		8.5				Y
18		8.5				Y
24		8.5				Y
31		8.5				Y

<Has sample met the minimums? D.O.
DISTRIBUTION
 PWS ID: 41 91810
 System Name: FERN RIDGE MIDDLE SCH
 Sample Period: OCT 2022
 Month/Year
 Sample Frequency: _____
 Distribution Samples required: _____

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 7.8
 Alk _____ (Alkalinity)
 PO4 _____ (Orthophosphate)
 Other _____ ()

Print Name: Daniel Putschman
 Signature: Dan Putschman
 Date: 10/31/22

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

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/>