

BEAR DOWN—
ARE MAKING 5 COPIES

WITH WATER SAMPLES.

State of Florida • Department of Health and Rehabilitative Services • Division of Health

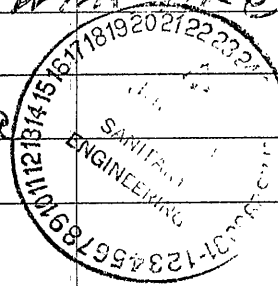
BUREAU OF LABORATORIES
N. J. SCHNEIDER, PHD., MPH, CHIEF

DATE COLLECTED 7/19/71		COUNTY Hills		COLLECTOR Carr		DATE REC'D 7-19-71		DATE TESTED 7-19-71				
TYPE OF SUPPLY	CITY-TOWN	S/D	TRLR. PK.	INST.	SCHOOL	BOTTLED	MOTEL	REST	DAIRY	POOL	HOME	OTHER Swim Area

NAME OF S/D OR LOCALITY BEING SAMPLED						NAME OR LOCATION OF WATER PLANT					
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TYPE OF SAMPLE	ROUTINE	RE-CHECK	MAIN CLEARANCE	WELL SURVEY	OTHER Swim Area							
LAB	JAX	MIAMI	TAMPA	TALLA.	PENSA.	ORL.	W. P. B.	APAL.	COUNTY			

NAME AND MAILING ADDRESS OF PERSON/FIRM TO RECEIVE REPORT										REMARKS	
H.C. H.D.											



LAB. NO.	COLL. NO.	SAMPLING POINT	APPEAR- ANCE	CI RES'D	PH	LB. 48	BG 48	MPN 100 MLS	MF 100 MLS	NON- COLIFORM
9878	1	BOY SCOUT CAMP						110		
879	2	RAINBOW LAKE, West						110		
		11 11, East								

WATER BACTERIOLOGY

REPORTS MAY BE DISCARDED
AFTER SIX MONTHS

INTERPRETATIONS-RECOMMENDATIONS

No. 1+2 (4)

Satisfactory for swimming

HAC

L 529 (REV. 70)

BY:

NAME Herman A. Cheatwood

TITLE Eng. Tech.

BUREAU OF SANITARY ENGINEERING