



First Advantage

A Symphony Technology Group Company

D-1

480 Quadrangle Drive Suite A
Bolingbrook, IL 60440
Phone: 800-939-4782
Fax: 855-626-5374

Alcohol Test Report

Attn: Nicole Lawrence

841 N Broadway Room 501

Milwaukee, WI 53202

Phone: 414-286-2442

Client Name: City Milw DPW/DOT

Account Number: 194824-00001

Donor Name: Louis W Jones

Donor ID:

Employee ID 1: 019254

Employee ID 2:

Emp Category:

Screen Result: 0.000

Confirmed Result: 0.000

Serial Number: 2564

Specimen Collection Date: 4/21/2016 12:39 PM

First Report Date: 4/25/2016 12:47 PM

Test Number: 143

Confirmation Test #:

BAT Name:

BAT ID:

Equipment Type: ALCOMONITOR CC

Test Reason: Return To Duty

Test Type: DOT

Result Status: Complete

Specimen Type: Breath Alcohol

Confirmation Test Time: 09:00 AM

Test Account Number: 194824-00001

Test Client Name: City Milw DPW/DOT

Location ID:

Cost Center:

The following information will help you interpret the Breath Alcohol Result in accordance with DOT regulations, please see 49 CFR Part 40, §40.23(c).

If this is a Non-DOT test, follow your written company policy.

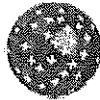
Initial Screening	Confirmation	Test Result
< 0.020	n/a Complete	(Pass)
	< 0.020	Complete (Pass)
≥ 0.020	Between 0.020 and 0.039	Complete (Prohibitive Conduct), requires action under DOT regulations
	≥ 0.040	Positive (Fail), requires immediate action.

If you have questions, please contact Customer Service.

ALCDET

4/26/2016

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First Advantage

A Syneos Health Company

480 Quadrangle Drive Suite D
Bolingbrook, IL 60440
Phone: 800-939-4782
Fax: 855-626-5374

D-1

Controlled Substance Test Report

Attn: Nicole Lawrence
841 N Broadway Room 501
Milwaukee, WI 53202
Phone: 414-286-2442
Donor Name: Louis W Jones
Donor ID:

Client Name: City Milw DPW/DOT
Account Number: 194824-00001
Employee ID 1: 019254
Employee ID 2:
Emp Category:

Test Result: Negative
Result Description: Negative
Substances Found:
MRO Verified Comment:

Specimen ID: 4010734
Collection Date: 4/21/2016 12:45 PM
Testing Panel: Quest Nida Panel w/Testsure
CCF Received: 4/22/2016
Verified Date: 4/25/2016
Reported Date: 4/25/2016 1:32 PM
Collection Site: Concentra Medical Center-Downtown Milwaukee
Transmitted By: Pavithra Joshi Nayak

Test Reason: Return To Duty
Test Type: DOT - FMCSA
Lab Account #: 10350359
Lab Name: Quest Diagnostics
Test Account #: 194824-00001
Client Name: City Milw DPW/DOT
Cost Center:
Location ID:

Comments:

This is a return to duty or follow-up test. Per DOT regulations, 49 CFR Part 40, § 40.67, a collection under direct observation must be conducted. Please check the CCF. If an observed collection was not done, you must immediately direct the employee to go back for a collection under direct observation.

Certified Medical Review Officer:

S. B. Hoffman, M.D. FACP

MRO Phone:

888-794-6574

S. B. Hoffman MD, FACP

DRUDET

Positive tests confirmed using gas chromatography/mass spectrometry
All reported lab results conform with current HHS and DOT guidelines. Reviewed in accordance with 49 CFR Part 40.

4/26/2016 11:11 AM

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