

Log-in Checklist

RQ- 2017-08-01-54

Shipping Method: Fedex

Date/Time of Receipt: 12-8-17/10:20

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
Yes	No	Yes	No				
Red	1.4	7		✓			

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

****Note:** If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

**Chain of Custody/ Field Sheet(s) Included? Yes ☒ No ☐

CONTAINER CHECK

**Evidence Tape on Bottles? Yes ☒ No ☒ If yes, is it intact? Yes ☒ No ☐

**Caps on tight? Yes ☒ No ☐ **Containers intact? Yes ☒ No ☐

**Sufficient Sample Volume: Yes ☒ No ☐

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.						
Analysis	Yes	No	Analysis	Yes	No	
W-1,4 DIOX			W-PC-AA-SF			
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)			
W-BNA (-625, -R)			W-PDQUAT			
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R			
W-ENDO-AA			W-PSCL-TQ			
W-GLYPH			W-PSNP-TQ			
W-NP-AA-SF			W-PST-CL-R			
W-PAH (-R)			W-TR-TQ			
W-PCB-R			W-CT-CI-R			

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

**Acid Preserved Samples: pH ≤ 2.0? Yes ☐ No ☐ NA ☒ Init: SR

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes ☐ No ☐ NA ☒ Init: SR

Coolers Unpacked/Checked by: SR Date: 12-8-17

NCRs (Y/N)? N

Event ID: WQAP-2017-12-08-01

NCR #

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes _____ No ✓

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes _____ No _____

If no, were samples shipped on dry ice? Yes _____ No _____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes _____ No _____

Date and time samples preserved: _____

Additional Comments:

Algal Bloom Response - As needed

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Kirby Wolfe

Field Report Prepared By:

Chase Conley

Project ID: BLOOM-RESP

Collected By:

Chase Conley, Jan Berrington

Sampling Agency:

SOROC

Location	RQ-2016-08-07-54	Field ID	12/7/2017	SD120717-11	Field ID	STORET	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen	mg/L	Total Res. Chlorine	Bottle Group(s)
Field ID	Huckleberry Lake	Time	12/7/2017	SD120717-11	Field ID	STORET	Fresh	70	% sat	(mg/L)	A, B, C
STORET #	Canal - Algae Bloom						Temp (C)	pH	Sample Depth	Sp. Conductance	D
							23.9	7.5	0.3	97	
Latitude	dd	Longitude	dd	Salinity (ppt)	Comments						
	dms		dms		Algae Sample						
Location		Field ID									
STORET #											
Latitude	dd	Longitude	dd	Salinity (ppt)	Comments						
	dms		dms								
Location		Field ID									
STORET #											
Latitude	dd	Longitude	dd	Salinity (ppt)	Comments						
	dms		dms								
Location		Field ID									
STORET #											
Latitude	dd	Longitude	dd	Salinity (ppt)	Comments						
	dms		dms								

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
Chase Conley	12/7/17 1500	Fedex	1	SR	12-8-17/10:20

12/8/2017 10:30 AM
* Microcystin

Ju Young Kim

Group: A	Bottle Type:	PT-50ML	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>2</u>
BLOOM-ID							
Group: B	Bottle Type:	BG-WD250	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>1</u>
W-MCYST-AA							
Group: C	Bottle Type:	BP-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>1</u>
CHLSUITE-W							
Group: C	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	<u>1</u>
W-NH3							
W-NO2NO3							
W-S-A-TP							
W-TKN							
Group: C	Bottle Type:	P-125ML	# of Bottles: 1	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	<u>1</u>
W-PO4-F							
Group: D	Bottle Type:	BP-1L	# of Bottles: 1	Preservative:	Lugols	Enter Number of Bottles Sent to Lab	<u>1</u>
DTY-QN-C							
PKD-QN-C							

Date of Request: 26-JUL-2017
 Created By: WOLFE_K On: 26-JUL-2017
 Modified By: SWANSON_C On: 27-JUL-2017
 Customer: WQAP
 Project: BLOOM-RESP
 Division: Division of Environmental Assessment and Restoration
 District: SROC
 Sampling Event: Algal Bloom Response - As needed

Send Coolers To:

Phone: 850-245-8416
 2295 Victoria AVE
 Suite 364
 Fort Myers, FL 33901
 Attn: Kirby Wolfe

Program Module Number:

Priority: 3
 Event Status: S
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 26-JUL-2017
 Biology Request Reviewed By: SWANSON_C On: 27-JUL-2017
 Sampling Kit Required: YES Ship on: 26-JUL-2017
 Sampling Kit Shipped: YES On: 27-JUL-2017
 Sampling Kit Packed By: SHAIK_A
 Preservatives Needed: YES
 Date to Receive Samples: 07-AUG-2017
 Received By:

Send Final Report To:

2295 Victoria AVE
 Suite 364
 Fort Myers, FL 33901
 Attn: Kirby Wolfe

Report Type: Final Only
 FTP Data: NO
 QC Report: YES
 Date Log: NO
 Authorization Log: NO

Comments: Analyze toxin upon receipt after consultation with Biology's Taxonomy Manager.

- 1 - case of nitric acid
- 2 - cases of sulfuric acid

Bottle Groups A/B - separate event, priority 1
 Bottle Groups C/D - separate event, C - priority 3, D - priority 12

Bottle Group A - Priority 1
 For algal dominant taxon.

Bottle Group B - Priority 1
 For toxin testing.

Bottle Group C - Priority 3
 Water quality testing

Bottle Group D - Priority 12
 For algal full ID.

There are multiple bottles per Group in case multiple sample targets or sample locations are needed. Samplers use best professional judgement to decide which samples are appropriate to collect for a particular response. All sets of bottles do not have to be filled at one time.

Bottle Group A (Biological) With 2 Samples:

Bottle Type: PT-50ML Number of Bottles: 2 Preserved With: ICE
 BLOOM-ID Template: DEFAULT (SOP-AB05) Assessment of dominant algal taxa in bloom or mat sample

Bottle Group B (Water) With 1 Samples:

Bottle Type: BG-WD250 Number of Bottles: 1 Preserved With: ICE
 W-MCYST-AA Template: DEFAULT (EPA 8321B) Microcystins in water matrices by HPLC/MS/MS

Bottle Group C (Water) With 1 Samples:

Bottle Type: BP-1L Number of Bottles: 1 Preserved With: ICE
 CHLSUITE-W Template: DEFAULT (SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry

Bottle Group C (Water) With 1 Samples:

Bottle Type: P-500ML	Number of Bottles: 1	Preserved With: ICE And H2SO4
W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO2NO3	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 1	Preserved With: FILTER-ICE
W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Bottle Group D (Water) With 1 Samples:

Bottle Type: BP-1L	Number of Bottles: 1	Preserved With: Lugols
DTY-QN-C	Template: DEFAULT	(SOP-AB05_1) No. of diatom taxa of quantitative phytoplankton sample.
PKD-QN-C	Template: DEFAULT	(SOP-AB05) No. of wet taxa of quantitative phytoplankton sample.

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

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FedEx Express *Package US Airbill*

FedEx Tracking Number **8119 3904 5422**

1 From
 Date 12/7/17
 Sender's Name Chloe Conley Phone 239 314 5643
 Company FL DEP
 Address 2600 Blairstone Rd
 City Tallahassee State FL ZIP 32399

2 Your Internal Billing Reference
3 To
 Recipient's Name SAMPLE RECEIVING Phone 850 245-8086

Company FLORIDA DEP/CHEMISTRY SECTION
 Address 2600 BLAIRSTONE RD
 We cannot deliver to P.O. boxes or P.O. ZIP codes.
 Address TALLAHASSEE State FL ZIP 32399-6542
 Use this line for the HOLD location address or for continuation of your shipping address.

0127681335



8119 3904 5422

Form ID No. 0215
Recipient's Copy

4 Express Package Service *To most locations. **Packages up to 150 lbs.**
For packages over 150 lbs., use the FedEx Express Freight US Airbill.

Next Business Day	2 or 3 Business Days
☐ FedEx First Overnight Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day A.M. Second business morning.* Saturday Delivery NOT available.
☒ FedEx Priority Overnight Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Standard Overnight Next business afternoon.* Saturday Delivery NOT available.	☐ FedEx Express Saver Third business day.* Saturday Delivery NOT available.

5 Packaging *Declared value limit \$500.

☐ FedEx Envelope*
 ☐ FedEx Pak*
 ☐ FedEx Box
 ☐ FedEx Tube
 ☒ Other

6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.

☐ **Saturday Delivery**
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ **No Signature Required**
Package may be left without obtaining a signature for delivery.

☐ **Direct Signature**
Someone at recipient's address may sign for delivery.

☐ **Indirect Signature**
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods?

☒ No
 ☐ Yes As per attached Shipper's Declaration.
 ☐ Yes Shipper's Declaration not required.

☐ **Dry Ice**
Dry Ice, 9, UN 1845

☐ **Cargo Aircraft Only**

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below. Obtain recip. Acct. No. ☐

☐ Sender Acct. No. in Section I will be billed.
 ☒ Recipient
 ☐ Third Party
 ☐ Credit Card
 ☐ Cash/Check

Total Packages 1 Total Weight 1.0 lbs.

Credit Card Auth. 611

Your liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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