

Lake Istokpoga

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Kirby Wolfe

Field Report Prepared By:

Project ID: SPPROJECTS

Collected By:

Sampling Agency:

Location <i>Istokpoga Algae Center</i>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <i>29 Nov 16</i> Time <i>12:50</i>	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Field ID <i>G4SD0156</i>		Matrix (type, e.g., Salt, Fresh, etc) <i>Fresh</i>		Diss. Oxygen <i>113.5</i>	☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L) <i>N/A</i>
STORET #		Temp (C) <i>20.31</i>	pH <i>7.03</i>	Sample Depth <i>0.5</i>	☒ ft ☐ m	Sp. Conductance (umho/cm) <i>not cal</i>
Latitude <i>81° 27' 23.3"</i>	☒ dd ☐ dms	Longitude <i>81° 16' 34.4"</i>	☒ dd ☐ dms	Salinity (ppt) <i>NA</i>	Comments <i>windy with 1/2 foot waves</i>	
Location <i>Istokpoga Algae West</i>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <i>29 Nov 16</i> Time <i>11:05</i>	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID <i>G4SD0155</i>		Matrix (type, e.g., Salt, Fresh, etc) <i>Fresh</i>		Diss. Oxygen <i>114.2</i>	☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L) <i>N/A</i>
STORET #		Temp (C) <i>20.10</i>	pH <i>6.85</i>	Sample Depth <i>0.5</i>	☒ ft ☐ m	Sp. Conductance (umho/cm) <i>not cal</i>
Latitude <i>27° 22' 30"</i>	☐ dd ☐ dms	Longitude <i>81° 16' 34.4"</i>	☒ dd ☐ dms	Salinity (ppt) <i>NA</i>	Comments <i>windy with 1/2 foot waves</i>	
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	☐ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments	
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	☐ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments	

Relinquished By: <i>Jed</i>	Date/Time <i>11/29/16/16:00</i>	Shipping Method <i>FedEx</i>	Number of Coolers Shipped:	Received By: <i>SK</i>	Date/Time <i>11/30/16/9:55</i>
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Group: A	Bottle Type: PT-50ML	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
BLOOM-ID					
Group: B	Bottle Type: BG-WD250	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
W-MCYST-AA					
Group: C	Bottle Type: BP-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
CHLSUITE-W					
Group: C	Bottle Type: P-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
TURBIDITY					
W-COLOR					
W-TSS					
Group: C	Bottle Type: P-500ML	# of Bottles: 6	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab	2
W-NH3					
W-NO2NO3					
W-SATP					
W-TKN					
W-TOC					
Group: C	Bottle Type: P-125ML	# of Bottles: 6	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	2
W-PO4-F					
Group: D	Bottle Type: BP-1L	# of Bottles: 6	Preservative: Lugols	Enter Number of Bottles Sent to Lab	2
DTY-QN-C					
PKD-QN-C					

Lake Istokpoga

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Kirby Wolfe

Field Report Prepared By: Clell Fard

Project ID: SPPROJECTS

Collected By: Clell FardSampling Agency: Highlands County

Location <u>Istokpoga Algae Northwest</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>29 Nov 16</u> Time <u>10:30</u>	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Field ID <u>G4SD0152</u>		Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>		Diss. Oxygen <u>114.9</u>	☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L) <u>N/A</u>
STORET #		Temp (C) <u>20.72</u>	pH <u>6.60</u>	Sample Depth <u>0.5</u>	☒ ft ☐ m	Sp. Conductance (umho/cm) <u>not cal</u>
Latitude <u>27° 24.387' N</u>	☒ dd ☐ dms	Longitude <u>81° 19.250' W</u>	☒ dd ☐ dms	Salinity (ppt) <u>na</u>	Comments <u>windy with 1/2 foot waves</u>	
Location <u>Istokpoga Algae Northeast</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>29 Nov 16</u> Time <u>13:15</u>	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID <u>G4SD0151</u>		Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>		Diss. Oxygen <u>116.4</u>	☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L) <u>N/A</u>
STORET #		Temp (C) <u>20.33</u>	pH <u>7.08</u>	Sample Depth <u>0.5</u>	☒ ft ☐ m	Sp. Conductance (umho/cm) <u>not cal</u>
Latitude <u>27° 25.857' N</u>	☒ dd ☐ dms	Longitude <u>81° 16.311' W</u>	☒ dd ☐ dms	Salinity (ppt) <u>na</u>	Comments <u>windy with 1/2 foot waves</u>	
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	☐ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments	
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	☐ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments	

Relinquished By: <u>[Signature]</u>	Date/Time <u>11/29/16/16:00</u>	Shipping Method <u>Fed Ex</u>	Number of Coolers Shipped:	Received By: <u>[Signature]</u>	Date/Time <u>11-30-16/9:55</u>
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Group: A	Bottle Type: PT-50ML	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
BLOOM-ID					
Group: B	Bottle Type: BG-WD250	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
W-MCYST-AA					
Group: C	Bottle Type: BP-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
CHESUTE-W					
Group: C	Bottle Type: P-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
TURBIDITY W-COLOR W-TSS					
Group: C	Bottle Type: P-500ML	# of Bottles: 6	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab	2
W-NH3 W-NO2NO3 W-SATP W-TKN W-TOC					
Group: C	Bottle Type: P-125ML	# of Bottles: 6	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	2
W-PO4-F					
Group: D	Bottle Type: BP-1L	# of Bottles: 6	Preservative: Lugols	Enter Number of Bottles Sent to Lab	2
DTY-QN-C PKD-QN-C					

Lake Istokpoga

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Kirby Wolfe

Field Report Prepared By: Clell Ford

Project ID: SPPROJECTS

Collected By:

Clell Ford

Sampling Agency:

Highlands County

Location <u>Istokpoga Algae South</u>		☐ Comp	Collection (comp begin or grab)	☒ Grab	Date <u>29 Nov 16</u>	Time <u>11:45</u>	☒ Eastern	Composite end	Bottle Group(s)
Field ID <u>G4SD 0153</u>		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Total Res. Chlorine		AB	
STORET #		Temp (C) <u>20.36</u>		pH <u>6.83</u>		Sample Depth <u>0.5</u>		CD	
Latitude <u>27° 18.992'</u>		Longitude <u>81° 17.331'</u>		Salinity (ppt) <u>NA</u>		Comments <u>windy - 1/4' waves</u>			
Location <u>Istokpoga Algae Southeast</u>		☐ Comp	Collection (comp begin or grab)	☒ Grab	Date <u>29 Nov 16</u>	Time <u>12:15</u>	☒ Eastern	Composite end	Bottle Group(s)
Field ID <u>G4SD 0154</u>		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Total Res. Chlorine		AB	
STORET #		Temp (C) <u>20.36</u>		pH <u>6.94</u>		Sample Depth <u>0.5</u>		CD	
Latitude <u>27° 21.128'</u>		Longitude <u>81° 14.684'</u>		Salinity (ppt) <u>NA</u>		Comments <u>windy - 1/4' waves</u>			
Location		☐ Comp	Collection (comp begin or grab)	☐ Grab	Date	Time	☐ Eastern	Composite end	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Total Res. Chlorine			
STORET #		Temp (C)		pH		Sample Depth			
Latitude		Longitude		Salinity (ppt)		Comments			
Location		☐ Comp	Collection (comp begin or grab)	☐ Grab	Date	Time	☐ Eastern	Composite end	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Total Res. Chlorine			
STORET #		Temp (C)		pH		Sample Depth			
Latitude		Longitude		Salinity (ppt)		Comments			

Relinquished By:

Date/Time

Shipping Method

Number of Coolers Shipped:

Received By:

Date/Time

md29 Nov 16 / 1600Fed ExSK11-28-16 / 4:55

Group: A	Bottle Type: PT-50ML	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
BLOOM-ID					
Group: B	Bottle Type: BG-WD250	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
W-MCYST-AA					
Group: C	Bottle Type: BP-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
CHL SUITE-W					
Group: C	Bottle Type: P-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
TURBIDITY					
W-COLOR					
W-TSS					
Group: C	Bottle Type: P-500ML	# of Bottles: 6	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab	2
W-NH3					
W-NO2NO3					
W-SATP					
W-TKN					
W-TOC					
Group: C	Bottle Type: P-125ML	# of Bottles: 6	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	2
W-PO4-F					
Group: D	Bottle Type: BP-1L	# of Bottles: 6	Preservative: Lugols	Enter Number of Bottles Sent to Lab	2
DTY-QN-C					
PKD-QN-C					

Date of Request: 26-JUL-2016
 Created By: WOLFE_K On: 26-JUL-2016
 Modified By: MATTHEWS_D On: 14-OCT-2016
 Customer: WQAP
 Project: SPPROJECTS
 Division: Division of Environmental Assessment and Restoration
 District: south
 Sampling Event: Lake Istokpoga

Send Coolers To:

Phone: (869)402-6545
 Highlands County Parks and Natural Resources
 4344 George Blvd.
 Sebring, FL 33875
 Attn: Clell Ford

Program Module Number:
 Priority: 3
 Event Status: S
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 14-OCT-2016
 Biology Request Reviewed By: MATTHEWS_D On: 14-OCT-2016
 Sampling Kit Required: YES Ship on: 02-NOV-2016
 Sampling Kit Shipped: YES On: 03-NOV-2016
 Sampling Kit Packed By: SHAIK_A
 Preservatives Needed: YES
 Date to Receive Samples: 07-NOV-2016
 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 or designee.

6 - vials 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.

Please print two copies of algal job labels at login.

Bottle Group A (Biological) With 6 Samples:

Bottle Type: PT-50ML Number of Bottles: 6 Preserved With: ICE
 BLOOM-ID Template: DEFAULT (SOP-AB05) Assessment of dominant algal taxa in bloom or mat sample

Bottle Group B (Water) With 6 Samples:

Bottle Type: BG-WD250 Number of Bottles: 6 Preserved With: ICE
 W-MCYST-AA Template: DEFAULT (EPA 8321B) Microcystins in water matrices by HPLC/MS/MS

Bottle Group C (Water) With 6 Samples:

Bottle Type: BP-1L Number of Bottles: 6 Preserved With: ICE
 CHLSUITE-W Template: DEFAULT (SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry
 Bottle Type: P-1L Number of Bottles: 6 Preserved With: ICE
 TURBIDITY Template: DEFAULT (EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
 W-COLOR Template: DEFAULT (SM 2120 B) True Color measured at 450 nm

Bottle Group C (Water) With 6 Samples:

Bottle Type: P-1L	Number of Bottles: 6	Preserved With: ICE
W-COLOR	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
Color (true)		
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: P-500ML	Number of Bottles: 6	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
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 6	Preserved With: ICE-FLTR
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 6 Samples:

Bottle Type: BP-1L	Number of Bottles: 6	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.

Log-in Checklist

RQ- 2016-11-07-08

Shipping Method: FedEx

Date/Time of Receipt: 11-29-16/9:55

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	
Blue	2.5	14		✓			
Blue	0.4	14		✓			
Blue	0.4	14		✓			

*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					

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ✓ No NA Init: SK

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

Coolers Unpacked/Checked by: SK

Date: 11-30-16

NCRs (Y/N)? ✓

Event ID: WQAP-2016-11-30-01 / WQAP-2016-11-30-02

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:

00763

01000

FedEx Package
Express US Airbill

FedEx Tracking Number 8103 9283 7939

1 From
Date 29 Nov 16
Sender's Name Clell Ford Phone 863 402-6545
Company Highlands County
Address 4344 George Blvd
City Sebring State FL ZIP 33875

2 Your Internal Billing Reference

3 To
Recipient's Name SAMPLE RECEIVING Phone 850 245-8085

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

 Address
Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE State FL ZIP 32399

0124031825



8103 9283 7939

Form ID No. 0215

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

- ☐ FedEx First Overnight
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☒ FedEx Priority Overnight
Next business morning. *Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☐ FedEx Standard Overnight
Next business afternoon. *Saturday Delivery NOT available.

2 or 3 Business Days

- ☐ FedEx 2Day A.M.
Second business morning. *Saturday Delivery NOT available.
- ☐ FedEx 2Day
Second business afternoon. *Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☐ 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?

- One box must be checked.
- ☐ No ☐ Yes As per attached Shipper's Declaration ☐ Yes Shipper's Declaration not required
- ☐ Dry Ice Dry Ice, 3, UN 1845 x kg
- Restrictions apply for dangerous goods—see the current FedEx Service Guide. ☐ 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 45 lbs.

Credit Card Auth.

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

fedex.com 1800.GoFedEx 1800.463.3339

fedex.com 1800.GoFedEx 1800.463.3339

00762

01000

FedEx
ExpressPackage
US AirbillFedEx
Tracking
Number

8103 9283 7928

1 From

Date

29 Nov 16

Sender's
Name

Cliff Ford

Phone

863 402-6545

Company

Highlands County

Address

1344 George Blvd

Dept./Floor/Suite/Room

City

Sebring

State

FL

ZIP

33875

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone

850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 BLAIRSTONE RD

Dept./Floor/Suite/Room

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

TALLAHASSEE

State

FL

ZIP

32399

0124031825



8103 9283 7928

Form
ID No.

0215

MUR3

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

☐

FedEx First Overnight

Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☒

FedEx Priority Overnight

Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐

FedEx Standard Overnight

Next business afternoon.*
Saturday Delivery NOT available.

2 or 3 Business Days

☐

FedEx 2Day A.M.

Second business morning.
Saturday Delivery NOT available.☐

FedEx 2Day

Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐

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?

One box must be checked.

☐

No

☐

Yes

As per attached
Shipper's Declaration.☐

Yes

Shipper's Declaration
not required.☐

Dry Ice

Dry Ice, 3, UN 1845

kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

☐ 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

Total Weight

lbs.

Credit Card Auth.

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

611

fedex.com 1800.GoFedEx 1800.463.3339

fedex.com 1800.GoFedEx 1800.463.3339

00761

01000

FedEx Package
Express US Airbill

FedEx Tracking Number 8103 9283 7917

1 From

Date

29 Nov 16

Sender's Name

Clell Ford

Phone

863 402-6545

Company

Highlands County

Address

4344 George Blvd

Dept./Floor/Suite/Room

City

Sebr.

State

FL

ZIP

33875

2 Your Internal Billing Reference

3 To

Recipient's Name

SAMPLE RECEIVING

Phone

850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 BLAIRSTONE RD

Dept./Floor/Suite/Room

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

TALLAHASSEE

State

FL

ZIP

32399

0124031825



8103 9283 7917

Form ID No.

0215

MUR3

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

☐ FedEx First Overnight
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☒ FedEx Priority Overnight
Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx Standard Overnight
Next business afternoon.*
Saturday Delivery NOT available.

2 or 3 Business Days

☐ FedEx 2Day A.M.
Second business morning.*
Saturday Delivery NOT available.

☐ FedEx 2Day
Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ 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?

One box must be checked.

☐ No ☒ Yes
As per attached Shipper's Declaration.

☐ Yes
Shipper's Declaration not required.

☐ Dry Ice
Dry Ice, 9 UN 1845 x kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

☐ 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 1 will be billed.

☒ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

50

lbs.

Credit Card Auth.

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

611

fedex.com 1.800.GoFedEx 1.800.463.3339

fedex.com 1.800.GoFedEx 1.800.463.3339