Request Number: RQ-2016-12-05-05

Lake Istokpoga

Florida Department of Environmental Protection
Central Laboratory Submittal Form

Customer: WQAP

Project ID: SPPROJECTS

Requester: Kirby Wolfe

Collected By: Clell Ford

Field Report Prepared By: Clell Ford

Sampling Agency: Highlands County

RQ-2016-12-05-05

Please Write Date & Time
Lake Istokpoga
Algae W

G4SD0155 Field ID
STORET G4SD0155

☐ Comp ☑ Grab	Collection (comp begin or grab) Date 27 Dec 16 Time 09:10	Eastern Central	Composite end Date	Time	Bottle Group(s) (See pg 2)	A C D
Matrix (type, e.g., Salt, Fresh, etc) fresh	Diss. Oxygen 104.5	☐ mg/L ☑ % sat	Total Res. Chlorine (mg/L) N/A			
Temp (C) 21.83	pH 7.45	Sample Depth 0.5	☑ ft ☐ m	Sp. Conductance (umho/cm) not cal		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) N/A	Comments no bloom evident - Mycocystin bottle not filled/Shipped			

RQ-2017-12-05-05

Please Write Date & Time
Lake Istokpoga
Algae CEN

G4SD0156 Field ID
STORET G4SD0156

☐ Comp ☑ Grab	Collection (comp begin or grab) Date 27 Dec 16 Time 10:05	Eastern Central	Composite end Date	Time	Bottle Group(s)	A C D
Matrix (type, e.g., Salt, Fresh, etc) fresh	Diss. Oxygen 108.8	☐ mg/L ☑ % sat	Total Res. Chlorine (mg/L) N/A			
Temp (C) 22.05	pH 7.19	Sample Depth 0.5	☑ ft ☐ m	Sp. Conductance (umho/cm) not cal		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) N/A	Comments no bloom evident - Mcyst-AA bottle not filled/Shipped			

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:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
[signature]	27Dec16/12:45	FedEx		SK	12-28-16/12:25

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	0
	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-S-A-TP						
	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						

Request Number: RQ-2016-12-05-05

Lake Istokpoga

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Project ID: SPPROJECTS

Requester: Kirby Wolfe

Collected By: Clell Ford

Field Report Prepared By: Clell Ford

Sampling Agency: Highlands County

RQ-2016-12-05-05

Please Write Date & Time
Lake Istokpoga
Algae S

G4SD0153 (Field ID)
G4SD0153 (STORET)

Latitude ☐dd ☐dms	Longitude ☐dd ☐dms	☐ Comp ☑ Grab	Collection (comp begin or grab) Date 27Dec16 Time 09:30	Eastern / Central	Composite end Date / Time	Bottle Group(s) (See pg 2)	
		Matrix (type, e.g., Salt, Fresh, etc): fresh	Diss. Oxygen: 106.2 ☐ mg/L ☑ % sat	Total Res. Chlorine (mg/L): N/A		A C D	
		Temp (C): 22.14	pH: 7.24	Sample Depth: 0.5 ☑ ft ☐ m	Sp. Conductance (umho/cm): not cal		
		Salinity (ppt): NA	Comments: no bloom evident - MCYST-AA bottle not filled / shipped				

RQ-2016-12-05-05

Please Write Date & Time
Lake Istokpoga
Algae SE

G4SD0154 (Field ID)
G4SD0154 (STORET)

Latitude ☐dd ☐dms	Longitude ☐dd ☐dms	☐ Comp ☑ Grab	Collection (comp begin or grab) Date 27Dec16 Time 09:50	Eastern / Central	Composite end Date / Time	Bottle Group(s)	
		Matrix (type, e.g., Salt, Fresh, etc): fresh	Diss. Oxygen: 106.6 ☐ mg/L ☑ % sat	Total Res. Chlorine (mg/L): N/A		A C D	
		Temp (C): 22.16	pH: 7.20	Sample Depth: 0.5 ☐ ft ☐ m	Sp. Conductance (umho/cm): not cal		
		Salinity (ppt): NA	Comments: no bloom evident - MCYST-AA bottle not filled / shipped				

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:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
[signature]	27Dec16/12:45	FedEx		SL	12-28-16/12:25

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	0
	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-S-A-TP 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						

Request Number: RQ-2016-12-05-05

Lake Istokpoga

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Project ID: SPPROJECTS

Requester: Kirby Wolfe

Collected By: Clell Ford

Field Report Prepared By: Clell Ford

Sampling Agency: Highlands County

RQ-2016-12-05-05

Please Write Date & Time
Lake Istokpoga
Algae NE

Field ID: G4SD0151
STORET: G4SD0151

☐ Comp ☑ Grab | Collection (comp begin or grab) Date 27 Dec 16 Time 10:20 (Eastern / Central) | Composite end Date Time | Bottle Group(s) (See pg 2): A C D

Matrix (type, e.g., Salt, Fresh, etc): fresh | Diss. Oxygen 110.1 ☐ mg/L ☑ % sat | Total Res. Chlorine (mg/L) N/A

Temp (C) 22.03 | pH 7.26 | Sample Depth 0.5 ☑ ft ☐ m | Sp. Conductance (umho/cm) not cal

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) N/A | Comments: no bloom evident - MCYST-AA bottle not filled / shipped

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RQ-2016-12-05-05

Please Write Date & Time
Lake Istokpoga
Algae NW

Field ID: G4SD0152
STORET: G4SD0152

☐ Comp ☑ Grab | Collection (comp begin or grab) Date 27 Dec 16 Time 08:50 (Eastern / Central) | Composite end Date Time | Bottle Group(s): A C D

Matrix (type, e.g., Salt, Fresh, etc): fresh | Diss. Oxygen 100.8 ☐ mg/L ☑ % sat | Total Res. Chlorine (mg/L) N/A

Temp (C) 22.71 | pH 7.50 | Sample Depth 0.5 ☑ ft ☐ m | Sp. Conductance (umho/cm) not cal

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) N/A | Comments: no bloom evident - MCYST-AA bottle not filled / shipped

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Location | Field ID | STORET # | Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms

☐ Comp ☐ Grab | Collection (comp begin or grab) Date Time (Eastern / Central) | Composite end Date Time | Bottle Group(s)

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen ☐ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) | pH | Sample Depth ☐ ft ☐ m | Sp. Conductance (umho/cm)

Salinity (ppt) | Comments

Location | Field ID | STORET # | Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms

☐ Comp ☐ Grab | Collection (comp begin or grab) Date Time (Eastern / Central) | Composite end Date Time | Bottle Group(s)

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen ☐ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) | pH | Sample Depth ☐ ft ☐ m | Sp. Conductance (umho/cm)

Salinity (ppt) | Comments

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
[signature]	27 Dec 16 / 12:45	Fed Ex		S/C	12-28-16 / 12:25

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	0
	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-S-A-TP						
	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						

RQ-2016-12-05-05

Date of Request:	26-JUL-2016
Created By:	WOLFE_K On: 26-JUL-2016
Modified By:	MATTHEWS_D On: 21-NOV-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

Send Final Report To:

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: 16-NOV-2016
Biology Request Reviewed By:	MATTHEWS_D On: 21-NOV-2016
Sampling Kit Required:	YES Ship on: 05-DEC-2016
Sampling Kit Shipped:	YES On: 05-DEC-2016
Sampling Kit Packed By:	KITCHEN_S
Preservatives Needed:	YES
Date to Receive Samples:	05-DEC-2016
Received By:	

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

Comments: Please print two copies of algal job labels at login

1 - case of sulfuric acid

Analyze toxin upon receipt after consultation with Biology's Taxonomy Manager or designee.

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.

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

Bottle Group C (Water) With 6 Samples:

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	
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-2016-12-05-05

Shipping Method: Fedex

Date/Time of Receipt: 12-28-16 / 12:25

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	-0.2	13		✓			
Red	0.1	12		✓			
Red	0.6	12		✓			

*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: 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:** 12-28-16 **NCRs (Y/N)?** N

Event ID: WQAR-2016-12-28-03 **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:

00758

01000

FedEx Express Package US Airbill

FedEx Tracking Number 8103 9283 7880

MUR3

Form ID No. 0215 Recipient's Copy

1 From

Date 27Dec16

Sender's Name Clell Ford Phone 863 402-6345

Company Highlands, County

Address 4344 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

Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

0124031825

8103 9283 7880

4 Express Package Service * To most locations.

Packages up to 150 lbs. For packages over 150 lbs., see 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.
- [X] 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 [X] 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. [X] Recipient [ ] Third Party [ ] Credit Card [ ] Cash/Check

262

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

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fedex.com 1800.GoFedEx 1800.463.3339

00533
01000

FedEx Express Package US Airbill

FedEx Tracking Number 8104 1261 6356

MUR4

0215

Recipient's Copy

1 From

Date 27 Dec 16

Sender's Name Clell Ford Phone 863 402-6545

Company Highlands County

Address 4344 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

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 32399-6542

Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

0124452242

8104 1261 6356

4 Express Package Service * To most locations.

Packages up to 150 lbs.
For packages over 150 lbs., see 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.
- [x] 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
- [x] 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.
- [x] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

[redacted]262

Total Packages 1 Total Weight 2.9 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

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FedEx Express Package US Airbill

FedEx Tracking Number 8104 1261 9745

MUR 4

Form ID No. 0215 Recipient's Copy

1 From

Date 27 ~~January~~ Dec

Sender's Name Clell Ford Phone 863 402-6545

Company Highlands County

Address 4344 George Blvd Dept./Floor/Suite/Room

City Sebring, FL State 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.

Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

City TALLAHASSEE State FL ZIP 32399-6542

0124452242

8104 1261 9745

4 Express Package Service * To most locations. Packages up to 150 lbs. For packages over 150 lbs., see 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.
- [X] 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 [X] 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. [X] Recipient [ ] Third Party [ ] Credit Card [ ] Cash/Check

262

Total Packages 1 Total Weight 5 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.

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