Florida Department of Environmental Protection

Central Laboratory Sample Submittal Form

Event ID *

Request Number: RQ-2015-05-11-32
Project Greenshores

Customer: NW-DIST
Project ID: DISTRICT
PMAS: 1306

Requester: Cheryl Bunch
Collected By: Zach Schang
Sampling Agency: FDEP

Field Report Prepared By:
Send Final Report To: Cheryl Bunch

Lab ID *	Location	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	Range Marker E. of Texar	☐ Comp ☑ Grab Date 5/11/15 Time 9:15	Date Time	
	Field ID: 1	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.57	Storet Station Number: 330214326S1
	Matrix (include type e.g. Salt, Fresh, etc): Salt	Temp (C): 26.41	pH: 8.09	Sample Depth ☑ m ☐ ft: .15
			Salinity (PPTh) ☐ Sp Conductance (umho/cm): 12.99	NPDES Number
	Latitude: 30°25'13" ☐ dd ☑ dms	Longitude: 87°10'59.5" ☐ dd ☑ dms	Comments	

Lab ID *	Location	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	½ Bridge and Muscogee	☐ Comp ☑ Grab Date 5/11/15 Time 9:30	Date Time	
	Field ID: 2	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.55	Storet Station Number: 330258GS2
	Matrix (include type e.g. Salt, Fresh, etc): Salt	Temp (C): 26.44	pH: 8.11	Sample Depth ☑ m ☐ ft: .15
			Salinity (PPTh) ☐ Sp Conductance (umho/cm): 13.13	NPDES Number
	Latitude: 30°25'42.2" ☐ dd ☑ dms	Longitude: 87°11'37" ☐ dd ☑ dms	Comments	

Lab ID *	Location	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	East of Primary Storm Drain	☐ Comp ☑ Grab Date 5/11/15 Time 9:40	Date Time	
	Field ID: 3	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.44	Storet Station Number: 330252GS3
	Matrix (include type e.g. Salt, Fresh, etc): Salt	Temp (C): 26.56	pH: 8.08	Sample Depth ☑ m ☐ ft: .15
			Salinity (PPTh) ☐ Sp Conductance (umho/cm): 12.96	NPDES Number
	Latitude: 30°24'58" ☐ dd ☑ dms	Longitude: 87°11'39.3" ☐ dd ☑ dms	Comments	

Lab ID *	Location	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	East of Primary Storm Drain	☐ Comp ☑ Grab Date 5/11/15 Time 9:42	Date Time	
	Field ID: 3 duplicate	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.40	Storet Station Number: 330252GS3
	Matrix (include type e.g. Salt, Fresh, etc): salt	Temp (C): 26.57	pH: 8.07	Sample Depth ☑ m ☐ ft: .15
			Salinity (PPTh) ☐ Sp Conductance (umho/cm): 12.40	NPDES Number
	Latitude: 30°24'58" ☐ dd ☑ dms	Longitude: 87°11'39.3 ☐ dd ☑ dms	Comments: Field Duplicate	

Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
			ARD	5-12-15 09:30				

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group: A	Bottle Type:	P-1L	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	CHLSUITE-W						
Group: A	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	NW-UWF-ENT						
	NW-UWF-FC						
Group: A	Bottle Type:	P-1L	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	TURBIDITY						
	W-COLOR						
	W-TSS						
Group: A	Bottle Type:	P-500ML	# of Bottles:	16	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab** _____
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						

Florida Department of Environmental Protection

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Event ID *

Request Number: RQ-2015-05-11-32
Project Greenshores

Customer: NW-DIST
Project ID: DISTRICT
PMAS: 1306

Requester: Cheryl Bunch
Collected By: Zach Schang
Sampling Agency: FDEP

Field Report Prepared By:
Send Final Report To: Cheryl Bunch

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	100ft S of Stormdrain	☐ Comp ☑ Grab	Date 5/11/15 Time 9:46	Date Time	
	Field ID: 4	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.30	Storet Station Number: 3302J2654	
	Matrix: Salt	Temp (C): 26.51	pH: 8.11	Sample Depth: .15 ☑ m ☐ ft	Salinity: 13.07 ☑ PPTh ☐ Sp Conductance (umho/cm)	NPDES Number
	Latitude: 30°25'01" ☐ dd ☑ dms	Longitude: 87°11'47.8" ☐ dd ☑ dms	Comments		

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	End of Chase St	☐ Comp ☑ Grab	Date 5/11/15 Time 9:53	Date Time	
	Field ID: 5	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 5.80	Storet Station Number: 3302J2655	
	Matrix: salt	Temp (C): 26.77	pH: 7.64	Sample Depth: .15 ☑ m ☐ ft	Salinity: 10.95 ☑ PPTh ☐ Sp Conductance (umho/cm)	NPDES Number
	Latitude: 30°24'55.9 ☐ dd ☑ dms	Longitude: 87°11'52.9" ☐ dd ☑ dms	Comments		

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	1/2 Muscogee and Hawkshaw 400ft from shore	☐ Comp ☑ Grab	Date 5/11/15 Time 10:06	Date Time	
	Field ID: 6	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 6.60	Storet Station Number: 3302J1656	
	Matrix: Salt	Temp (C): 26.93	pH: 7.69	Sample Depth: .15 ☑ m ☐ ft	Salinity: 11.04 ☑ PPTh ☐ Sp Conductance (umho/cm)	NPDES Number
	Latitude: 30°24'47.4" ☐ dd ☑ dms	Longitude: 87°12'0" ☐ dd ☑ dms	Comments		

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	1/2 Bridge and Port	☐ Comp ☑ Grab	Date 5/11/15 Time 10:13	Date Time	
	Field ID: 7	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.54	Storet Station Number: 33025657	
	Matrix: salt	Temp (C): 26.85	pH: 8.09	Sample Depth: .15 ☑ m ☐ ft	Salinity: 12.45 ☑ PPTh ☐ Sp Conductance (umho/cm)	NPDES Number
	Latitude: 30°24'16.5" ☐ dd ☑ dms	Longitude: 87°11'52" ☐ dd ☑ dms	Comments		

Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
			[signature]	5-12-15 09:30				

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group: A	Bottle Type: BOD-UNIN	P-1L	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
Group: A	Bottle Type: CHLSUITE-W	BP-1L	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
Group: A	Bottle Type: NW-UWF-ENT NW-UWF-FC	TEST HAS NO BOTTLE	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
Group: A	Bottle Type: TURBIDITY W-COLOR W-TSS	P-1L	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
Group: A	Bottle Type: W-NH3 W-NO2NO3 W-S-A-TP W-TKN	P-500ML	# of Bottles: 16	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab** _____

Florida Department of Environmental Protection

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Event ID *

Request Number: RQ-2015-05-11-32
Project Greenshores

Customer: NW-DIST
Project ID: DISTRICT
PMAS: 1306

Requester: Cheryl Bunch
Collected By: Zach Schang
Sampling Agency: FDEP
Field Report Prepared By:
Send Final Report To: Cheryl Bunch

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	West of Stormdrain inside rocks	☐ Comp ☑ Grab	Date 5/11/15 Time 10:03 (Central)	Date Time	
	Field ID: 8	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 5.95	Storet Station Number: 3302J2GS8	
	Matrix: salt	Temp (C): 26.75	pH: 8.21 7.47	Sample Depth: ☑ m ☐ ft .15	Salinity (PPTh): 9.74 ☐ Sp Conductance (umho/cm)
	Latitude: 30°24'59.5" ☐ dd ☑ dms	Longitude: 87°11'52.7" ☐ dd ☑ dms	Comments: (low DO) Storet: 3302J2GS8		

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	West End of Hookshaw 100 ft S. of Outfall	☐ Comp ☑ Grab	Date 5/11/15 Time 10:40 (Central)	Date Time	
	Field ID: 9	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.58	Storet Station Number: 3302J1GS9	
	Matrix: salt	Temp (C): 26.88	pH: 8.04	Sample Depth: ☑ m ☐ ft .15	Salinity (PPTh): 12.10 ☐ Sp Conductance (umho/cm)
	Latitude: 30°24'34" ☐ dd ☑ dms	Longitude: 87°12'12.5" ☐ dd ☑ dms	Comments:		

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	Between Marina and Outfall	☐ Comp ☑ Grab	Date 5/11/15 Time 10:35 (Central)	Date Time	
	Field ID: 10	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.59	Storet Station Number: 3302J7GS10	
	Matrix: salt	Temp (C): 26.84	pH: 8.06	Sample Depth: ☑ m ☐ ft .15	Salinity (PPTh): 12.23 ☐ Sp Conductance (umho/cm)
	Latitude: 30°24'29.5" ☐ dd ☑ dms	Longitude: 87°12'18.1" ☐ dd ☑ dms	Comments:		

Lab ID *	Location	Comp / Grab	Collection (comp begin or grab) Eastern Central	Composite end Eastern Central	Bottle Group(s)**
	Entrance of Marina	☐ Comp ☑ Grab	Date 5/11/15 Time 10:28 (Central)	Date Time	
	Field ID: 11	Tot Res Chlorine (mg/L):	Diss Oxygen (mg/L): 7.96	Storet Station Number: 3302J7GS11	
	Matrix: Salt	Temp (C): 26.42	pH: 7.98	Sample Depth: ☑ m ☐ ft .15	Salinity (PPTh): 12.14 ☐ Sp Conductance (umho/cm)
	Latitude: 30°24'27.7" ☐ dd ☑ dms	Longitude: 87°12'26.8" ☐ dd ☑ dms	Comments:		

Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
			MRP	5-12-15 09:30				

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** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group: A	Bottle Type:	P-1L	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	CHLSUITE-W						
Group: A	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	NW-UWF-ENT						
	NW-UWF-FC						
Group: A	Bottle Type:	P-1L	# of Bottles:	16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	TURBIDITY						
	W-COLOR						
	W-TSS						
Group: A	Bottle Type:	P-500ML	# of Bottles:	16	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab** _____
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						

Florida Department of Environmental Protection

Central Laboratory Sample Submittal Form

Event ID *

Request Number: RQ-2015-05-11-32
Project Greenshores

Customer: NW-DIST
Project ID: DISTRICT
PMAS: 1306

Requester: Cheryl Bunch
Collected By: Zach Schang
Sampling Agency: FDEP
Field Report Prepared By:
Send Final Report To: Cheryl Bunch

Lab ID *:
Location: 1/4 Between Bridge and Port 400ft From Shore
Field ID: 12
Matrix (include type e.g. Salt, Fresh, etc): Salt
Temp (C): 26.64
pH: 8.06
Latitude: 30°24'20.5" (dms) Longitude: 87°12'13.2" (dms)
Comp ☐ Grab ☑ Collection (comp begin or grab) Eastern Central Date 5/11/15 Time 10:21
Composite end Eastern Central Date Time
Tot Res Chlorine (mg/L):
Diss Oxygen (mg/L): 7.51
Storet Station Number: 330257GS12
Sample Depth ☑ m ☐ ft: .15
Salinity (PPTh) ☑ / Sp Conductance (umho/cm) ☐: 12.48
NPDES Number:
Bottle Group(s)**:
Comments:

Lab ID *:
Location: Inside Hawkshaw Lagoon
Field ID: 13
Matrix (include type e.g. Salt, Fresh, etc): salt
Temp (C): 27.87
pH: 7.14
Latitude: 30°24'43.6" (dms) Longitude: 87°12'8.7" (dms)
Comp ☐ Grab ☑ Collection (comp begin or grab) Eastern Central Date 5/11/15 Time 11:00
Composite end Eastern Central Date Time
Tot Res Chlorine (mg/L):
Diss Oxygen (mg/L): 5.04
Storet Station Number: 330231HL2
Sample Depth ☑ m ☐ ft: .15
Salinity (PPTh) ☑ / Sp Conductance (umho/cm) ☐: 8.40
NPDES Number:
Bottle Group(s)**:
Comments:

Lab ID *:
Location: Inside Hawkshaw Lagoon
Field ID: Field Blank
Matrix (include type e.g. Salt, Fresh, etc): ~~Salt~~ Field Blank
Temp (C): 29.91
pH: 8.20
Latitude: 30°24'43.6" (dms) Longitude: 87°12'8.7" (dms)
Comp ☐ Grab ☑ Collection (comp begin or grab) Eastern Central Date 5/11/15 Time 10:58
Composite end Eastern Central Date Time
Tot Res Chlorine (mg/L):
Diss Oxygen (mg/L): 7.98
Storet Station Number: FB
Sample Depth ☑ m ☐ ft: .15
Salinity (PPTh) ☑ / Sp Conductance (umho/cm) ☐: 0.01
NPDES Number:
Bottle Group(s)**:
Comments:

Lab ID *:
Location: East of Stormdrain Inside BGS 2
Field ID: 14
Matrix (include type e.g. Salt, Fresh, etc): Salt
Temp (C): 27.06
pH: 7.78
Latitude: 30°24'47.2" (dms) Longitude: 87°12'4.3" (dms)
Comp ☐ Grab ☑ Collection (comp begin or grab) Eastern Central Date 5/11/15 Time 11:05
Composite end Eastern Central Date Time
Tot Res Chlorine (mg/L):
Diss Oxygen (mg/L): 6.97
Storet Station Number: 3705IGS7
Sample Depth ☑ m ☐ ft: .15
Salinity (PPTh) ☑ / Sp Conductance (umho/cm) ☐: 11.22
NPDES Number:
Bottle Group(s)**:
Comments:

Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
			[illegible]	5-12-15 09:30				

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** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group: A	Bottle Type: BOD-UNIN	P-1L	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	
Group: A	Bottle Type: CHLSUITE-W	BP-1L	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	
Group: A	Bottle Type: NW-UWF-ENT NW-UWF-FC	TEST HAS NO BOTTLE	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	
Group: A	Bottle Type: TURBIDITY W-COLOR W-TSS	P-1L	# of Bottles: 16	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	
Group: A	Bottle Type: W-NH3 W-NO2NO3 W-S-A-TP W-TKN	P-500ML	# of Bottles: 16	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab**	

Boldly "X" this box if there is qualified data on this page

CALIBRATION AND VERIFICATION LOG (FDEP SOP FT 1000-FT 1500, FD 1000-FD 4000)

Meter ID: #145390 Project:

Circle/Fill In: Lab Calibration or Calibration/Verification on Site_____

Temperature (Quarterly) FT 1400 Date of Last Temperature Verification 2/18/2015

DO DEP SOP FT 1500	Name	Date	Time CT-ET	Probe Charge	Probe Gain	Temp	D.O. Chart mg/L	Meter D.O. mg/L	% DO	Pass / Fail	Lab / Field
Calibr.											
ICV											
CCV											
CCV											

Report DO mg/L with one decimal figure and DO % saturation as a whole number with no decimals
DO Gain Range 0.7 to 1.4; DO Charge Range 25-75: DO Acceptance criteria from Table 1 ±0.3 mg/L

Spec. Cond. FT 1200	Name	Date	Time CT-ET	Lot #	Expir. Date	Standard µmhos/cm	Meter Reading µmhos/cm	Pass / Fail	Lab / Field
Calibr.									
ICV									
CCV									
CCV									

Report specific conductance as a whole number with no decimal figure Conductivity Acceptance criteria ± 5%

pH DEP SOP FT 1100	Name	Date	Time CT-ET	Lot #	Expir. Date	mV	pH Buffer SU	Meter reading SU	Pass / Fail	Lab / Field
Calibr.										
Calibr.										
Calibr.										
ICV										
CCV										
CCV										

Report pH with one decimal place; pH Acceptance criteria ±0.2 SU; mV pH4 Range 0±50; mV pH 10 Range -180±50;
mV pH 4 Range +180±50; Slope from 7 to 10 and 4 to 7 must be between 165 and 180 mV

Depth (Quarterly) Date of Last Depth Verification _____

Depth Sensor	Name	Date	Time CT-ET	Zero the Sensor	ICV Value	Pass / Fail	Lab / Field
Pressure mode in air				0.000			

ICV acceptance criteria ±5 %

Other notes: (1) Numbers ≤4, are rounded down; numbers ≥ 5 are rounded up (e.g., 5.15 becomes 5.2).
(2) Always wait for meter to stabilize before recording any readings.

RQ-2015-05-11-32

Date of Request: 20-APR-2015
Created By: BUNCH_CA On: 20-APR-2015
Modified By: MILLER_EB On: 20-APR-2015
Customer: NW-DIST
Project: DISTRICT
Division: Division of Environmental Assessment and Restoration
District: Northwest District
Sampling Event: Project Greenshores

Send Coolers To:

Phone: SC-695-8300
160 Government Center
Suite 308
Pensacola, FL 32502-5794
Attn: Cheryl Bunch

Send Final Report To:

160 Government Center
Suite 308
Pensacola, FL 32502-5794
Attn: Cheryl Bunch

Program Module Number: 1306
Priority: 3
Event Status: R
Criminal Investigation: NO
Chemistry Request Reviewed By: WATTS_J On: 20-APR-2015
Biology Request Reviewed By: MILLER_EB On: 20-APR-2015
Sampling Kit Required: YES Ship on: 04-MAY-2015
Sampling Kit Shipped: YES On: 04-MAY-2015
Sampling Kit Packed By: KITCHEN_S
Date to Receive Samples: 11-MAY-2015
Received By: SHAIK_A On: 12-MAY-2015

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

Comments: No preservatives needed.

Suite A (Water) With 16 Samples:

Bottle Type: P-1L		Number of Bottles: 16	Preserved With: ICE
BOD-UNIN	Template: DEFAULT	(SM 5210 B) BOD, NOT nitrogen-inhibited	
Bottle Type: BP-1L		Number of Bottles: 16	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry	
Bottle Type: TEST HAS NO		Number of Bottles: 16	Preserved With: ICE
NW-UWF-ENT	Template: DEFAULT	(EPA 1600 (MF)) Enterococci by membrane filter method by UWF Overflow Laboratory for NWD	
NW-UWF-FC	Template: DEFAULT	(SM 9222 D) Fecal coliforms by membrane filter method by UWF Overflow Laboratory for NWD	
Bottle Type: P-1L		Number of Bottles: 16	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: 16	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	

Log-in Checklist

RQ- 2015-05-11-32

Shipping Method: Fed Ex

Date/Time of Receipt: 5-12-15 9:30

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	1.9C	12		✓			
Red	1.0C	12		✓			
Red	1.7C	12		✓			
Red	2.6C	12		✓			
Red	1.8C	12		✓			
White	1.3C	4		✓			

*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-PCB-R		
W-AHERB-AA (-AHB-AA-R)			W-PC-AA-SF		
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)					

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

**Acid Preserved Samples: pH ≤ 2.0 ? Yes ✓ No____ NA____ Init: [illegible]

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes____ No____ NA ✓ Init: ____

Coolers Unpacked/Checked by: [illegible] Date: 5/12/15 NCRs (Y/N)? ~

Event ID: Project Greenshores
NW-DIST-2015-05-12-01 (DISTRICT)
Date Received: 12-MAY-2015 09:30

NCR # ____

Log-in Checklist

Samples with Incorrect pH Preservation

Field ID	Bottle Test ID(s)	pH	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 – Methyl Mercury Preservation Check:

Samples Preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____

Additional Comments:

FedEx Express Package US Airbill

FedEx Tracking Number 8079 3409 1015

Form ID No. 0215

m
e 5/11/15

ider's ne Zach Schang Phone 850 595-0599

npany FDEP

dress 160 W. Government St 308
Dept./Floor/Suite/Room

Pns State FL ZIP 32502

ur Internal Billing Reference

4 Express Package Service * To most locations.
NOTE: Service order has changed. Please select carefully.

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

- [ ] 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. *Fee applies.*
- [ ] Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. *Fee applies.*

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

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

- [ ] Cargo Aircraft Only

7 Payment *Bill to:*
Enter FedEx Acct. No. or Credit Card No. below.

- [ ] Sender — Acct. No. in Section 1 will be billed
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

Obtain recip. Acct. No. [ ]

[redacted]262

Total Packages: 1 of 6 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.

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0119189357

8079 3409 1015

MOR4

FedEx Express Package US Airbill

FedEx Tracking Number 8079 3409 1026

Form ID No. 0215

5/11/15

's Zach Schang Phone 850 595-0599

any FDEP

ss 160 W. Government St. 308
Dept./Floor/Suite/Room

Pns State FL ZIP 32502

Internal Billing Reference

4 Express Package Service * To most locations.
NOTE: Service order has changed. Please select carefully.

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

- [ ] 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. *Fee applies.*
- [ ] Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. *Fee applies.*

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

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

- [ ] Cargo Aircraft Only

7 Payment *Bill to:*
Enter FedEx Acct. No. or Credit Card No. below.

- [ ] Sender — Acct. No. in Section 1 will be billed
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

Obtain recip. Acct. No. [ ]

[redacted]262

Total Packages: 2 of 6 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.

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fedex.com 1.800.GoFedEx 1.800.463.3339

ient's SAMPLE RECEIVING Phone 850 245-8085

any FLORIDA DEPT/CHEMISTRY SECTION

ss 2600 BLAIRSTONE RD
not deliver to P.O. boxes or P.O. ZIP codes. Dept./Floor/Suite/Room

ss
s 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.

TALLAHASSEE State FL ZIP 32399

0119189357

8079 3409 1026

FedEx Express Package US Airbill

FedEx Tracking Number 8079 3409 1048

Form ID No. 0215

5/11/15

Sender's Name Zach Schang Phone 850595-0599

Company FDEP

Address 160 W. Government St. 308
Dept./Floor/Suite/Room

City Pns State FL ZIP 32502

Your Internal Billing Reference

Recipient's Name SAMPLE RECEIVING Phone 850 245-8085

Company FLORIDA DEPT/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD
Dept./Floor/Suite/Room
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.

0119189357

8079 3409 1048

4 Express Package Service * To most locations.

NOTE: Service order has changed. Please select carefully.

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

☐ 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. Fee applies.

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

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

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box. ☐ 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

[redacted]262

Total Packages 4 of 6 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.

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MUR 4

FedEx Express Package US Airbill

FedEx Tracking Number 8079 3409 1037

Form ID No. 0215

5/11/15

Sender's Name Zach Schang Phone 850 595-0599

Company FDEP

Address 160 W. Government St. 308
Dept./Floor/Suite/Room

City Pns State FL ZIP 32502

Your Internal Billing Reference

Recipient's Name SAMPLE RECEIVING Phone 850 245-8085

Company FLORIDA DEPT/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD
Dept./Floor/Suite/Room
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.

0119189357

8079 3409 1037

4 Express Package Service * To most locations.

NOTE: Service order has changed. Please select carefully.

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

☐ 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. Fee applies.

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

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

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box. ☐ 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

[redacted]62

Total Packages 3 of 6 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.

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FedEx Express® Package US Airbill

FedEx Tracking Number 8079 3409 1060

Form ID No. 0215

5/11/15

Sender's Name Zach Schang Phone 850 595 0599

Company FDEP

Address 160 W. Government St. 308
Dept./Floor/Suite/Room

City Pns State FL ZIP 32502

Your Internal Billing Reference

Recipient's Name SAMPLE RECEIVING Phone 850 245-8085

Company FLORIDA DEPT/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD
Do not 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.

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

0119189357

8079 3409 1060

4 Express Package Service
* To most locations.
NOTE: Service order has changed. Please select carefully.

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.
- [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

- [ ] 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. Fee applies.
- [ ] Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. Fee applies.

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

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

- [ ] Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

- [ ] Sender — Acct. No. in Section 1 will be billed.
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

Obtain recip. Acct. No. [ ]

[redacted]162

Total Packages 6 of 6 Total Weight 50 lbs.

Credit Card Auth

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