

Date of Request: 19-JUN-2012
 Created By: BUNCH_CA On: 19-JUN-2012
 Modified By: BRACKETT_K On: 31-JUL-2012
 Customer: NW-DIST
 Project: DISCRTNARY
 Division:
 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

Program Module Number: 1306
 Priority: 3
 Event Status: S
 Criminal Investigation: NO
 Chemistry Request Reviewed By: BRACKETT_K On: 31-JUL-2012
 Biology Request Reviewed By: MILLER_EB On: 30-JUL-2012
 Sampling Kit Required: YES Ship on: 06-AUG-2012
 Sampling Kit Shipped: YES On: 06-AUG-2012
 Sampling Kit Packed By: KITCHEN_S
 Date to Receive Samples: 20-AUG-2012
 Received By:

Send Final Report To:

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

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

Comments:**Suite A (Water) With 14 Samples:**

Bottle Type: P-1L	Number of Bottles: 14	Preserved With: ICE
BOD-UNIN	Template: DEFAULT	(SM 5210 B) BOD, NOT nitrogen-inhibited
Bottle Type: BP-1L	Number of Bottles: 14	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: 14	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: 14	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 or Apparent Color
Color (true)		
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: P-500ML	Number of Bottles: 14	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

Florida Department of Environmental Protection

Central Laboratory Sample Submittal Form

Event ID *

Request Number: RQ-2012-08-20-12

Project Greenshores

Customer: NW-DIST

Project ID: DISCRTNARY

PMAS: 1306

Requester: Cheryl Bunch

Collected By:

Zach Schang

Sampling Agency:

FDEP Ecosystem Restoration

Field Report Prepared By:

Zach Schang

Send Final Report To:

Cheryl Bunch

Lab ID *	Location		☐ Comp ☒ Grab		Collection (comp begin or grab)		Eastern	Composite end		Eastern	Bottle Group(s)**
	West of Hawkshaw 100 ft S of outfall		Date 8/20/12 Time 9:45		Central			Date Time		Central	
	Field ID 9		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Matrix (include type e.g. Salt, Fresh, etc)		Temp (C) 28.12 pH 9.22		Sample Depth 1.5 m		☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)		NPDES Number		
	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	Composite end		Eastern	Bottle Group(s)**
	Between Marina and Outfall		Date 8/20/12 Time 9:41		Central			Date Time		Central	
	Field ID 10		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Matrix (include type e.g. Salt, Fresh, etc)		Temp (C) 28.16 pH 9.26		Sample Depth 1.5 m		☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)		NPDES Number		
	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	Composite end		Eastern	Bottle Group(s)**
	Entrance of Marina		Date 8/20/12 Time 9:35		Central			Date Time		Central	
	Field ID 11		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Matrix (include type e.g. Salt, Fresh, etc)		Temp (C) 28.04 pH 9.22		Sample Depth 1.5 m		☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)		NPDES Number		
	Latitude 30°24'27.7" ☐ dd ☒ dms		Longitude 87°12'26.8" ☐ dd ☒ dms		Comments						
Lab ID *	Location		☐ Comp ☒ Grab		Collection (comp begin or grab)		Eastern	Composite end		Eastern	Bottle Group(s)**
	Inside Hawkshaw Lagoon 1/4 between Port / Bridge		Date 8/20/12 Time 9:30		Central			Date Time		Central	
	Field ID 12		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Matrix (include type e.g. Salt, Fresh, etc)		Temp (C) 28.16 pH 9.24		Sample Depth 1.5 m		☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)		NPDES Number		
	Latitude 30°24'20.5" ☐ dd ☒ dms		Longitude 87°12'13.2" ☐ dd ☒ dms		Comments						
Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time			
ES	8/20/12	FEDEX	ICW	8-21-12/9:55							

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Page 1 of 2

Group: A	Bottle Type:	P-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	BOD-UNIN					
Group: A	Bottle Type:	BP-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	CHLSUITE-W					
Group: A	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	NW-UWF-ENT					
	NW-UWF-FC					
Group: A	Bottle Type:	P-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	TURBIDITY					
	W-COLOR					
	W-TSS					
Group: A	Bottle Type:	P-500ML	# of Bottles: 14	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

Event ID *

Request Number: RQ-2012-08-20-12

Central Laboratory Sample Submittal Form

Project Greenshores

Customer: NW-DIST

Project ID: DISCRTNARY

PMAS: 1306

Requester: Cheryl Bunch

Collected By:

Sampling Agency:

Field Report Prepared By:

Send Final Report To:

Zach Schang

Cheryl Bunch

FREP Ecosystem Restoration

Lab ID *	Location <u>End of Chase St</u>		☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**
	Field ID <u>5</u>		☒ Grab	Date <u>8/20/12</u> Time <u>9:20</u>	<u>Central</u>	Date	Time	
	Matrix (include type e.g. <u>Salt</u> Fresh, etc)	Temp (C) <u>28.10</u> pH <u>9.12</u>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>5.18</u>	Storet Station Number <u>3302J2G55</u>		
	Latitude <u>30°24'55.9"</u> ☐ dd ☒ dms	Longitude <u>87°11'52.9"</u> ☐ dd ☒ dms	Sample Depth ☒ m ☐ ft <u>1.5</u>	<u>25551</u>		☐ Salinity (PPTH)	NPDES Number	
	Comments							
Lab ID *	Location <u>1/2 Muscogee and Hawkshaw + 400 ft from shore</u>		☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**
	Field ID <u>6</u>		☒ Grab	Date <u>8/20/12</u> Time <u>10:15</u>	<u>Central</u>	Date	Time	
	Matrix (include type e.g. <u>Salt</u> Fresh, etc)	Temp (C) <u>28.06</u> pH <u>9.24</u>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>5.77</u>	Storet Station Number <u>3302J1G56</u>		
	Latitude <u>30°24'47.4"</u> ☐ dd ☒ dms	Longitude <u>87°12'0"</u> ☐ dd ☒ dms	Sample Depth ☒ m ☐ ft <u>1.5</u>	<u>24916</u>		☐ Salinity (PPTH)	NPDES Number	
	Comments							
Lab ID *	Location <u>1/2 between bridge and port</u>		☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**
	Field ID <u>7</u>		☒ Grab	Date <u>8/20/12</u> Time <u>9:26</u>	<u>Central</u>	Date	Time	
	Matrix (include type e.g. <u>Salt</u> Fresh, etc)	Temp (C) <u>28.09</u> pH <u>9.25</u>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>6.10</u>	Storet Station Number <u>3302J8G57</u>		
	Latitude <u>30°24'16.5"</u> ☐ dd ☒ dms	Longitude <u>87°11'52.1"</u> ☐ dd ☒ dms	Sample Depth ☒ m ☐ ft <u>1.5</u>	<u>24616</u>		☐ Salinity (PPTH)	NPDES Number	
	Comments							
Lab ID *	Location <u>W of Stormdrain - Inside Rocks</u>		☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**
	Field ID <u>8</u>		☒ Grab	Date <u>8/20/12</u> Time <u>9:16</u>	<u>Central</u>	Date	Time	
	Matrix (include type e.g. <u>Salt</u> Fresh, etc)	Temp (C) <u>27.84</u> pH <u>9.08</u>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>5.27</u>	Storet Station Number <u>3302J2G58</u>		
	Latitude <u>30°24'59.5"</u> ☐ dd ☒ dms	Longitude <u>87°11'52.7"</u> ☐ dd ☒ dms	Sample Depth ☒ m ☐ ft <u>1.5</u>	<u>25753</u>		☐ Salinity (PPTH)	NPDES Number	
	Comments							
Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
<u>Zach Schang</u>	<u>8/20/12</u>	<u>FEPEX</u>	<u>JTC</u>	<u>8-21/12/9:55</u>				

* 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: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
CHLSUITE-W						
Group: A	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
NW-UWF-ENT						
NW-UWF-FC						
Group: A	Bottle Type:	P-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
TURBIDITY						
W-COLOR						
W-TSS						
Group: A	Bottle Type:	P-500ML	# of Bottles: 14	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

Request Number: RQ-2012-08-20-12

Project Greenshores

Event ID *

Customer: NW-DIST

Project ID: DISCRTNARY

PMAS: 1306

Requester: Cheryl Bunch

Collected By:

Sampling Agency:

Field Report Prepared By:

Send Final Report To:

Zach Schang

Cheryl Bunch

Zach Schang

FDEP Ecosystem Restoration

Lab ID *	Location	☐ Comp		Collection (comp begin or grab)		☐ Eastern	Composite end		☐ Eastern	Bottle Group(s)**
	Field ID	☒ Grab	Date	Time	☒ Central	Date	Time	☐ Central		
	Matrix (include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C)	pH	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number				
	Latitude	☐ dd ☒ dms	Longitude	☐ dd ☒ dms	Sample Depth ☒ m ☐ ft	☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)	NPDES Number			
	Comments									
Lab ID *	Location	☐ Comp		☒ Grab		☐ Eastern	☐ Composite end		☐ Eastern	Bottle Group(s)**
	Field ID	Date	Time	☒ Central	Date	Time	☐ Central			
	Matrix (include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C)	pH	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number				
	Latitude	☐ dd ☒ dms	Longitude	☐ dd ☒ dms	Sample Depth ☒ m ☐ ft	☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)	NPDES Number			
	Comments									
Lab ID *	Location	☐ Comp		☒ Grab		☐ Eastern	☐ Composite end		☐ Eastern	Bottle Group(s)**
	Field ID	Date	Time	☒ Central	Date	Time	☐ Central			
	Matrix (include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C)	pH	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number				
	Latitude	☐ dd ☒ dms	Longitude	☐ dd ☒ dms	Sample Depth ☒ m ☐ ft	☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)	NPDES Number			
	Comments									
Lab ID *	Location	☐ Comp		☒ Grab		☐ Eastern	☐ Composite end		☐ Eastern	Bottle Group(s)**
	Field ID	Date	Time	☒ Central	Date	Time	☐ Central			
	Matrix (include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C)	pH	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number				
	Latitude	☐ dd ☒ dms	Longitude	☐ dd ☒ dms	Sample Depth ☒ m ☐ ft	☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)	NPDES Number			
	Comments									

Relinquished By:

Date/Time

Shipping Method:

Received By:

Date/Time

Relinquished By:

Date/Time

Received By:

Date/Time

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Page 1 of 2

Group: A	Bottle Type:	P-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
CHLSUITE-W						
Group: A	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
NW-UWF-ENT NW-UWF-FC						
Group: A	Bottle Type:	P-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
TURBIDITY W-COLOR W-TSS						
Group: A	Bottle Type:	P-500ML	# of Bottles: 14	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

Event ID *

Request Number: RQ-2012-08-20-12

Central Laboratory Sample Submittal Form

Project Greenshores

Customer: NW-DIST

Project ID: DISCRTNARY

PMAS: 1306

Requester: Cheryl Bunch

Collected By: Zach Schang

Sampling Agency: FDEP Ecosystem Restoration

Field Report Prepared By: Zach Schang

Send Final Report To: Cheryl Bunch

Lab ID *	Location <i>Inside Hawkshaw Lagoon</i>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <i>8/20/12</i> Time <i>1000</i>	Eastern Central	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**	
	Field ID <i>13</i>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <i>7.25</i>	Storet Station Number <i>33025142</i>			
	Matrix (include type e.g. Salt, Fresh, etc)	Temp (C) <i>27.01</i>	pH <i>8.74</i>	Sample Depth ☒ m <i>.15</i>	☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)	NPDES Number		
	Latitude <i>30°24'43.6"</i> ☐ dd ☒ dms	Longitude <i>87°12'8.7"</i> ☐ dd ☒ dms	Comments					
Lab ID *	Location <i>East of Stormdrain Inside PGS 2</i>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <i>8/20/12</i> Time <i>1007</i>	Eastern Central	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**	
	Field ID <i>14</i>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <i>8.18</i>	Storet Station Number <i>330251657</i>			
	Matrix (include type e.g. Salt, Fresh, etc)	Temp (C) <i>27.92</i>	pH <i>9.12</i>	Sample Depth ☒ m <i>.15</i>	☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)	NPDES Number		
	Latitude <i>30°24'47.2"</i> ☐ dd ☒ dms	Longitude <i>87°12'4.3"</i> ☐ dd ☒ dms	Comments					
Lab ID *	Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**	
	Field ID	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)	Storet Station Number			
	Matrix (include type e.g. Salt, Fresh, etc)	Temp (C)	pH	Sample Depth ☐ m ☐ ft	☐ Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number		
	Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Comments					
Lab ID *	Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**	
	Field ID	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)	Storet Station Number			
	Matrix (include type e.g. Salt, Fresh, etc)	Temp (C)	pH	Sample Depth ☐ m ☐ ft	☐ Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number		
	Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Comments					
Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
<i>ZS</i>	<i>8/20/12</i>	<i>FDEP</i>	<i>ICW</i>	<i>8/24/12/9:55</i>				

* 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: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
CHLSUITE-W						
Group: A	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
NW-UWF-ENT						
NW-UWF-FC						
Group: A	Bottle Type:	P-1L	# of Bottles: 14	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
TURBIDITY						
W-COLOR						
W-TSS						
Group: A	Bottle Type:	P-500ML	# of Bottles: 14	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab _____
W-NH3						
W-NO2NO3						
W-S-A-TP						
W-TKN						

FedEx *NEW Package*
 Express *US Airbill*
FedEx
Tracking
Number

8010 1449 6620

1 From This portion can be removed for Recipient's records.

 Date 8/20/12 FedEx Tracking Number 801014496620

 Sender's Name FDEP Zach Schum Phone 850 5950599

 Company FDEP Ecosystems Calibration

 Address 160 W. Gout St 308

 City Pal State FL ZIP 32502
2 Your Internal Billing Reference

 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.
☐

0453899248



8010 1449 6620

SPH1

Form
ID No. **0215**
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 new
 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
☐ NEW 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. Fee applies.
 For residential deliveries only.

 Does this shipment contain dangerous goods?
 One box must be checked.

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

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

☐ Dry Ice
 Dry Ice, 8, UN 1845 _____ kg
☐ Cargo Aircraft Only

7 Payment Bill to:

 Enter FedEx Acct. No. or Credit Card No. below. Obtain orig. Acct. No. ☐
☐ Sender Acct. No. in Section I will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

 Total Packages 1 Total Weight 50 lbs.

Credit Card Auth:

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

611

DEX NEW Package
Express US Airbill

FedEx
Tracking
Number

8010 1449 6653

This portion can be removed for Recipient's records.

FedEx

Tracking Number

801014496653

to
7-112

Phone

850 245-0899

party
FDEP Environmental Restoration

160 W. Court St

Dept./Floor/Suite/Room

308

State

FL

ZIP

32502

Internal Billing Reference

client's
SAMPLE RECEIVING

Phone

850 245-8085

party
FLORIDA DEP/CHEMISTRY SECTION

2600 BLAIRSTONE RD

not deliver to P.O. boxes or P.O. ZIP codes

Dept./Floor/Suite/Room

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.

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

TALLAHASSEE

State

FL

ZIP

32399-6542

0453899248



8010 1449 6653

Form
ID No

0215

SPH1

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 new
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

☐ NEW 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, 2 UN 1845

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
I will be billed.

☒ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

Credit Card Auth.

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

611

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DEX NEW Package
Express US Airbill

FedEx
Tracking
Number

8010 1449 6664

This portion can be removed for Recipient's records.

FedEx

Tracking Number

801014496664

to
7-112

Phone

850 245-0899

party
FDEP Environmental Restoration

160 W. Court St

Dept./Floor/Suite/Room

308

State

FL

ZIP

32502

Internal Billing Reference

client's
SAMPLE RECEIVING

Phone

850 245-8085

party
FLORIDA DEP/CHEMISTRY SECTION

2600 BLAIRSTONE RD

not deliver to P.O. boxes or P.O. ZIP codes

Dept./Floor/Suite/Room

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.

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

TALLAHASSEE

State

FL

ZIP

32399-6542

0453899248



Form
ID No

0215

SPH1

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 new
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

☐ NEW 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.

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☐ Indirect Signature

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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, 2 UN 1845

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
I will be billed.

☒ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

Credit Card Auth.

*Our liability is limited to \$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

dEX **NEW Package**
Express **US Airbill** FedEx Tracking Number **8010 1449 6642**

This portion can be removed for Recipient's records.

8/1/12 FedEx Tracking Number **801014496642**

to **Fach Schlang** Phone **850 245-8085**

any **FLDP Department to location**

SS **1612 W Court St** 308

PRIS State **FL** ZIP **32399**

Internal Billing Reference

ent's **SAMPLE RECEIVING** Phone **850 245-8085**

any **FLORIDA DEP/CHEMISTRY SECTION**

SS **2600 BLAIRSTONE RD**

not deliver to P.O. boxes or P.O. ZIP codes.

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

TALLAHASSEE State **FL** ZIP **32399-6542**

0453899248



8010 1449 6642

Form 10 No. **0215**

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 new
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

☐ **NEW 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, 5 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 I will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages Total Weight Credit Card Auth.

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

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FedEx.com 1800.GoFedEx 1800.463.3339

dEX **NEW Package**
Express **US Airbill** FedEx Tracking Number **8010 1449 6631**

This portion can be removed for Recipient's records.

8/20/12 FedEx Tracking Number **801014496631**

to **Fach Schlang** Phone **850 245-8085**

any **FLDP Department to location**

SS **1612 W Court St** 308

PRIS State **FL** ZIP **32399**

Internal Billing Reference

ent's **SAMPLE RECEIVING** Phone **850 245-8085**

any **FLORIDA DEP/CHEMISTRY SECTION**

SS **2600 BLAIRSTONE RD**

not deliver to P.O. boxes or P.O. ZIP codes.

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

TALLAHASSEE State **FL** ZIP **32399-6542**

0453899248



8010 1449 6631

Form 10 No. **0215**

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 new
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

☐ **NEW 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.

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☐ **Direct Signature**
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☐ **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, 5 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 I will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages Total Weight Credit Card Auth.

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

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Log-in Checklist

RQ- 2012-08-20-12

Shipping Method: Fedex Date/Time of Receipt: 8-21-12/9:55

COOLER CHECK

COOLER CHECK							
Cooler ID	Cooler Temp.	Evidence Tape				No. Sample Containers in Cooler	Tracking # (fill out only if waybill copy can't be place in folder)
		Present?		*Intact?			
		Yes	No	Yes	No		
White	2.6		/			12	
White	3.7		/			12	
Red	1.9		/			8	
Green	2.9		/			12	
White	2.9		✓			12	

If the temperature of a cooler is above 6.0 °C (or greater than 10.0 °C for W-1-4-DIOX) or an evidence seal is damaged then identify the bottles, in the affected cooler(s), on back of form.

CONTAINER CHECK

Evidence Tape on Bottles Present: Yes _____ No ☒ *If Yes, is it intact: Yes _____ No _____

Condition of Containers:

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

*Chain Of Custody/ Field Sheet(s) Included? Yes ☒ No _____

*Acid Preserved Samples: pH ≤ 2 ? Yes ☒ No _____ NA IAW

*Base Preserved Samples: pH ≥ 12 or 9? Yes _____ No _____ NA ☒ IAW
(W-CN, OV-CN - pH ≥ 12), (W-SULFDE-F, W-SULFIDE - pH ≥ 9)

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

Were Encore samples received? Yes _____ No ☒

If yes, place in freezer immediately upon receipt. Date/Time Placed in Freezer: _____

Was every sample placed in freezer within 48 hours of collection? Yes _____ No _____

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

*Preserved Samples for W-1-4-DIOX- pH<4? Yes _____ No _____ NA ☒

*Samples for W-1-4-DIOX- Samples free of chlorine? Yes _____ No _____ NA ☒

*Sample Volume Sufficient: Yes ☒ No _____

Coolers Unpacked/Checked by: IAW Date: 8-21-12 NCRs (y/n)? NO IAW

Event ID: NW-DIST-2012-08-21-03 NCR # _____

FOR CLEAN LAB USE ONLY – Methyl Mercury Preservation Check:

*Samples Preserved within 48 hours? Yes _____ No _____

Date/Time samples preserved: _____

* If "No" is checked then fill out the back of this form with the details (field ID, test IDs, etc.) and generate an NCR.

Log-in Checklist

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		Evid. Tape Not Intact
			CK	BR	CK	BR	

Samples With Incorrect pH Preservation

Field ID	Bottle Test ID(s)	pH	Action Taken

Samples With Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

Additional Comments:

CK - Cracked, BR - Broken