

Florida Department of Environmental Protection

Event ID: *

Request Number: RQ-2013-11-25-11

Central Laboratory Sample Submittal Form

Project Greenshores

Requester: Cheryl Bunch

Field Report Prepared By:

Customer: NW-DIST

Collected By:

Zach Schang

Send Final Report To: Cheryl Bunch

Project ID: DISCRTNARY

Sampling Agency:

FDEP

PMAS: 1306

Lab ID *	Location	☐ Comp ☒ Grab	Collection (comp begin or grab)	Eastern Central	Composite end	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	Salinity (PPT)	NPDES Number		
Latitude	Longitude		Comments				
Lab ID *	Location	☐ Comp ☒ Grab	Collection (comp begin or grab)	Eastern Central	Composite end	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	Salinity (PPT)	NPDES Number		
Latitude	Longitude		Comments				
Lab ID *	Location	☐ Comp ☒ Grab	Collection (comp begin or grab)	Eastern Central	Composite end	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	Salinity (PPT)	NPDES Number		
Latitude	Longitude		Comments				
Lab ID *	Location	☐ Comp ☒ Grab	Collection (comp begin or grab)	Eastern Central	Composite end	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	Salinity (PPT)	NPDES Number		
Latitude	Longitude		Comments				

* 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					

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Event ID *

Request Number: RQ-2013-11-25-11

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Project Greenshores

Requester: Cheryl Bunch

Field Report Prepared By: _____

Customer: NW-DIST

Collected By: Zach Schang

Send Final Report To: Cheryl Bunch

Project ID: DISCRTNARY

PMAS: 1306

Sampling Agency: FDEP

Lab ID *	Location <u>End of Chase St</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>12/2/13</u> Time <u>10:29</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**
Field ID <u>5</u>	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <u>10.91</u>	Storet Station Number <u>3302J2655</u>				
Matrix (include type e.g. Salt, Fresh, etc) <u>Salt</u>	Temp (C) <u>13.50</u>	pH <u>8.08</u>	Sample Depth ☒ m <u>.15</u> ☐ ft	<u>20.85</u>	☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)	NPDES Number	
Latitude <u>30°24'55.9"</u> ☐ dd ☒ dms	Longitude <u>87°11'52.9"</u> ☐ dd ☒ dms	Comments					
Lab ID *	Location <u>1/2 Muscogee and Hawthorne 400ft from shore</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>12/2/13</u> Time <u>10:48</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**
Field ID <u>6</u>	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <u>11.17</u>	Storet Station Number <u>3302J2656</u>				
Matrix (include type e.g. Salt, Fresh, etc) <u>Salt</u>	Temp (C) <u>13.79</u>	pH <u>8.12</u>	Sample Depth ☒ m <u>.15</u> ☐ ft	<u>20.94</u>	☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)	NPDES Number	
Latitude <u>30°24'47.4"</u> ☐ dd ☒ dms	Longitude <u>87°12'0"</u> ☐ dd ☒ dms	Comments					
Lab ID *	Location <u>1/2 between Bridge and Port</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>12/2/13</u> Time <u>11:00</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**
Field ID <u>7</u>	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <u>10.97</u>	Storet Station Number <u>3302J8657</u>				
Matrix (include type e.g. Salt, Fresh, etc) <u>Salt</u>	Temp (C) <u>13.42</u>	pH <u>8.14</u>	Sample Depth ☒ m <u>.15</u> ☐ ft	<u>19.99</u>	☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)	NPDES Number	
Latitude <u>30°24'16.5"</u> ☐ dd ☒ dms	Longitude <u>87°11'52.1"</u> ☐ dd ☒ dms	Comments					
Lab ID *	Location <u>West of Stormdrain, Inside Racks</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>12/2/13</u> Time <u>10:36</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Eastern Central	Bottle Group(s)**
Field ID <u>8</u>	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <u>9.98</u>	Storet Station Number <u>3302J2658</u>				
Matrix (include type e.g. Salt, Fresh, etc) <u>Salt</u>	Temp (C) <u>14.06</u>	pH <u>7.96</u>	Sample Depth ☒ m <u>.15</u> ☐ ft		☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)	NPDES Number	
Latitude <u>30°24'59.5"</u> ☐ dd ☒ dms	Longitude <u>87°11'52.7"</u> ☐ dd ☒ dms	Comments					
Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By: <u>SIC</u>
							<u>12-3-13/2:30</u>

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group Information.

last revised October 1, 2003

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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

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Project Greenshores

Requester: Cheryl Bunch

Field Report Prepared By:

Customer: NW-DIST

Collected By:

Zach Schang

Send Final Report To: Cheryl Bunch

Project ID: DISCRTNARY

PMAS: 1306

Sampling Agency:

FDEP

Lab ID *	Location <u>West End of Hawkshaw 100ft S. of Outfall</u>				☐ Comp		Collection (comp begin or grab)		Eastern		Composite end		Eastern		Bottle Group(s)**		
	Field ID <u>9</u>				☒ Grab		Date <u>12/13</u>		Time <u>11:27</u>		Date		Time				
	Matrix (include type e.g. Salt, Fresh, etc) <u>salt</u>				Temp (C) <u>13.85</u>		pH <u>8.13</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Latitude <u>30°24'34"</u> ☐ dd ☒ dms				Longitude <u>87°12'12.5"</u> ☐ dd ☒ dms				Sample Depth ☒ m <u>.15</u> ☐ ft		☒ Salinity (PPT) <u>20.8</u> ☐ Sp Conductance (umho/cm)		NPDES Number				
Comments																	
Lab ID *	Location <u>Between Marina and Outfall</u>				☐ Comp		Collection (comp begin or grab)		Eastern		Composite end		Eastern		Bottle Group(s)**		
	Field ID <u>10</u>				☒ Grab		Date <u>12/13</u>		Time <u>11:21</u>		Date		Time				
	Matrix (include type e.g. Salt, Fresh, etc) <u>salt</u>				Temp (C) <u>13.53</u>		pH <u>8.14</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Latitude <u>30°24'29.5"</u> ☐ dd ☒ dms				Longitude <u>87°12'18.1"</u> ☐ dd ☒ dms				Sample Depth ☒ m <u>.15</u> ☐ ft		☒ Salinity (PPT) <u>19.80</u> ☐ Sp Conductance (umho/cm)		NPDES Number				
Comments																	
Lab ID *	Location <u>Entrance of Marina</u>				☐ Comp		Collection (comp begin or grab)		Eastern		Composite end		Eastern		Bottle Group(s)**		
	Field ID <u>11</u>				☒ Grab		Date <u>12/13</u>		Time <u>11:12</u>		Date		Time				
	Matrix (include type e.g. Salt, Fresh, etc) <u>salt</u>				Temp (C) <u>13.38</u>		pH <u>8.13</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Latitude <u>30°24'27.7"</u> ☐ dd ☒ dms				Longitude <u>87°12'26.8"</u> ☐ dd ☒ dms				Sample Depth ☒ m <u>.15</u> ☐ ft		☒ Salinity (PPT) <u>19.54</u> ☐ Sp Conductance (umho/cm)		NPDES Number				
Comments																	
Lab ID *	Location <u>1/4 Between Bridge and Port 400ft from shore</u>				☐ Comp		Collection (comp begin or grab)		Eastern		Composite end		Eastern		Bottle Group(s)**		
	Field ID <u>12</u>				☒ Grab		Date <u>12/13</u>		Time <u>11:06</u>		Date		Time				
	Matrix (include type e.g. Salt, Fresh, etc) <u>salt</u>				Temp (C)		pH		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number				
	Latitude <u>30°24'20.5"</u> ☐ dd ☒ dms				Longitude <u>87°12'13.2"</u> ☐ dd ☒ dms				Sample Depth ☒ m <u>.15</u> ☐ ft		☒ Salinity (PPT) <u>19.45</u> ☐ 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	

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** Please see reverse side for Bottle Group Information.

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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

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Project Greenshores

Requester: Cheryl Bunch

Field Report Prepared By:

Customer: NW-DIST

Collected By:

Zach Schang

Send Final Report To: Cheryl Bunch

Project ID: DISCRTNARY

PMAS: 1306

Sampling Agency:

FDEP

Lab ID *	Location <i>Inside Hawkshaw Lagoon</i>			☐ Comp ☒ Grab		Collection (comp begin or grab) Date <i>11/2/13</i> Time <i>11:40</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>6.22</i>		Storet Station Number <i>3302J1HL2</i>									
	Matrix (include type e.g. Salt, Fresh, etc) <i>salt</i>			Temp (C) <i>15.66</i>		pH <i>7.42</i>		Sample Depth ☒ m <i>.15</i>		☒ Salinity (PPTH) <i>15.96</i>		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 Storm Drain Inside P6S 2</i>			☐ Comp ☒ Grab		Collection (comp begin or grab) Date <i>12/6/13</i> Time <i>11:47</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>10.54</i>		Storet Station Number <i>370251657</i>									
	Matrix (include type e.g. Salt, Fresh, etc) <i>salt</i>			Temp (C) <i>14.29</i>		pH <i>8.10</i>		Sample Depth ☒ m <i>.15</i>		☒ Salinity (PPTH) <i>20.98</i>		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>12-3-13/9:30</i>	

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** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Page 1 of 2

Group: A	Bottle Type: BOD-UNIN	P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab _____
Group: A	Bottle Type: CHLSUITE-W	BP-1L	# of Bottles: 14	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: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab _____
Group: A	Bottle Type: TURBIDITY W-COLOR W-TSS	P-1L	# of Bottles: 14	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: 14	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab _____

Date of Request: 21-OCT-2013
 Created By: BUNCH_CA On: 21-OCT-2013
 Modified By: WATTS_J On: 12-NOV-2013
 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: WATTS_J On: 12-NOV-2013
 Biology Request Reviewed By: MILLER_EB On: 21-OCT-2013
 Sampling Kit Required: YES Ship on: 18-NOV-2013
 Sampling Kit Shipped: YES On: 20-NOV-2013
 Sampling Kit Packed By: WHITE_I
 Date to Receive Samples: 25-NOV-2013
 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
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

Log-in Checklist

RQ- 2013-11-25-11

Shipping Method: Fedex Date/Time of Receipt: 12-3-13/9:30

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		
Red	2.2		☒	☒		12	
Red	3.0		☒	☒		12	
Red	4.3		☒	☒		128	
Red	2.2		☒	☒		12	
Red	4.2		☒	☒		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 ☐

*Base Preserved Samples: pH ≥ 12 or 9? Yes ☐ No ☒ NA ☒
(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: JK Date: 12-3-13 NCRs (y/n)? Y

Event ID: NW-DIST-2013-12-03-02 NCR # 4715

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

Preserved in Lab on 12-3-13
@ 12:50
Samples 1558077-1558090

00905
01000

FedEx Package
Express US Airbill

FedEx
Tracking
Number

8035 4002 7233

Form
ID No. 0215

Recip

1 From
Date 02-DEC-13

Sender's Name Zach Schenker Phone 850 555-8300

Company FDEP

Address 160 Govt Ctr.

City Pensacola State FL ZIP 32502

2 Your Internal Billing Reference

3 To
Recipient's Name SAMPLE RECEIVING Phone 850 245-6085

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD

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.

4 Express Package Service

NOTE: Service order has changed. Please select carefully.

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
will be delivered on Monday unless SA
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

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
must sign for delivery. Fee applies.

Indirect S
If no one is at
address, return
address only &
reimbursement del.

Does this shipment contain dangerous goods?

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

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

☐ Dry Ice
Dry Ice, 5, LBN 1003

☐ Cargo Aircraft

7 Payment Bill to:

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

☐ Sender
Acct. No. in Section
11 of this form. ☒ Recipient ☐ Third Party ☐ Credit Card

Total Packages 2/10 Total Weight 50 lbs. Credit Card Acct.

*Our liability is limited to \$5000 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



8035 40 2 7233

Express Package
US Airbill

FedEx
Tracking
Number

8035 4002 7222

02-DEC-13

From: Zach Schaefer

Phone: 850 595-8300

Party: FDEP

160 Governmental Ctr.

Pensacola

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

2600 BLAIRSTONE RD

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

TALLAHASSEE

State: FL ZIP: 32399



8035 4002 7222

0111825800

Express Package
US Airbill

FedEx
Tracking
Number

8035 4002 7244

02-DEC-13

From: Zach Schaefer

Phone: 850 595-8300

Party: FDEP

160 Govt Ctr.

Pensacola

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

2600 BLAIRSTONE RD

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

TALLAHASSEE

State: FL ZIP: 32399



8035 4002 7244

0111825800

Form
ID No.

0215

Recipient's Copy

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

2 or 3 Business Days

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

- ☐ 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?

- ☐ No ☐ Yes
One box must be checked. Shipper's Declaration not required.
- ☐ Dry Ice
Dry Ice, 9 UN 1845 x kg
- ☐ Cargo Aircraft Only

7 Payment Bill to:

- Enter FedEx Acct. No. or Credit Card No. below. Obtain recip. Acct. No. ☐
- ☐ Sender ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check
- Total Packages: 1 Total Weight: 10 lbs.
- Credit Card Auth: 611

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Express Package
US Airbill

FedEx
Tracking
Number

8035 4002 7244

02-DEC-13

From: Zach Schaefer

Phone: 850 595-8300

Party: FDEP

160 Govt Ctr.

Pensacola

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

2600 BLAIRSTONE RD

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

TALLAHASSEE

State: FL ZIP: 32399



8035 4002 7244

0111825800

Form
ID No.

0215

Recipient's Copy

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

- ☐ 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
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Package may be left without obtaining a signature for delivery.
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One box must be checked. Shipper's Declaration not required.
- ☐ Dry Ice
Dry Ice, 9 UN 1845 x kg
- ☐ Cargo Aircraft Only

7 Payment Bill to:

- Enter FedEx Acct. No. or Credit Card No. below. Obtain recip. Acct. No. ☐
- ☐ Sender ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check
- Total Packages: 1 Total Weight: 10 lbs.
- Credit Card Auth: 611

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

FedEx.com 1.800.GoFedEx 1.800.463.3339

FedEx.com 1.800.GoFedEx 1.800.463.3339

deX Package
Express US Airbill

FedEx
Tracking
Number

8035 4002 7266

02-DEC-13

to's Zach Schlegel

Phone 850 555-8300

company FDEP

address 160 Govt Ct.

city Pensacola

State FL ZIP 32502

our Internal Billing Reference

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 TALLAHASSEE

State FL ZIP 32399

0111625800



8035 4002 7266

Form 0215 Recipient's Copy

4 Express Package Service *To meet business day.

NOTE: Service order has changed. Please select carefully.

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. 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)

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

☐ Dry Ice
Dry Ice, 6 UN 1845

☐ Cargo Aircraft Only

7 Payment Bill to:

Sender ☐ Recipient ☒ Third Party ☐ Credit Card ☐ Cash/Check

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

Obtain recip. Acct. No. ☐

Total Packages 5/5 Total Weight 50 lbs.

Credit Card Auth. 611

Your liability is limited to US\$500 unless you declare a higher value. See the current FedEx Service Guide for details.

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edEx Package
Express US Airbill

FedEx
Tracking
Number

8035 4002 7255

02-DEC-13

to's Zach Schlegel

Phone 850 555-8300

company FDEP

address 160 Govt Ct.

city Pensacola

State FL ZIP 32502

our Internal Billing Reference

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 TALLAHASSEE

State FL ZIP 32399

0111625800



Form 0215 Recipient's Copy

4 Express Package Service *To meet business day.

NOTE: Service order has changed. Please select carefully.

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.

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☐ Dry Ice
Dry Ice, 6 UN 1845

☐ Cargo Aircraft Only

7 Payment Bill to:

Sender ☐ Recipient ☒ Third Party ☐ Credit Card ☐ Cash/Check

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

Obtain recip. Acct. No. ☐

Total Packages 5/5 Total Weight 50 lbs.

Credit Card Auth. 611

Your liability is limited to US\$500 unless you declare a higher value. See the current FedEx Service Guide for details.

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