

Florida Department of Environmental Protection

Event ID *

Request Number: RQ-2014-05-12-27

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: DISTRICT

Sampling Agency: FDEP

PMAS: 1306

Lab ID *	Location Range Marker E of Texas	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 9:14 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 1		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.63	Storet Station Number 3302H32654				
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 25.81 pH 7.27	Sample Depth ☒ m ☐ ft 1.5	Salinity (PPT) ☐ Sp Conductance (umho/cm) ☒	NPDES Number				
Latitude 30°25'13" ☐ dd ☒ dms	Longitude 87°10'59.5" ☐ dd ☒ dms	Comments						
Lab ID *	Location 1/2 Bridge Muscogee	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 9:41 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 2		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.60	Storet Station Number 3302J8652				
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 26.03 pH 7.32	Sample Depth ☒ m ☐ ft 1.5	Salinity (PPT) ☐ Sp Conductance (umho/cm) ☒	NPDES Number				
Latitude 30°25'42.2" ☐ dd ☒ dms	Longitude 87°11'37" ☐ dd ☒ dms	Comments						
Lab ID *	Location E of Primary Stormdrain PGS1	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 9:49 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 3		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.46	Storet Station Number 3302J2653				
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 26.05 pH 7.35	Sample Depth ☒ m ☐ ft 1.5	Salinity (PPT) ☐ Sp Conductance (umho/cm) ☒	NPDES Number				
Latitude 30°24'58" ☐ dd ☒ dms	Longitude 87°11'39.3" ☐ dd ☒ dms	Comments						
Lab ID *	Location 100ft S of Stormdrain	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 9:55 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 4		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.25	Storet Station Number 3302J2654				
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 26.07 pH 7.38	Sample Depth ☒ m ☐ ft 1.5	Salinity (PPT) ☐ Sp Conductance (umho/cm) ☒	NPDES Number				
Latitude 70°25'0" ☐ dd ☒ dms	Longitude 87°11'47.8" ☐ dd ☒ dms	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

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: DISTRICT

Sampling Agency:

FDEP

PMAS: 1306

Lab ID *	Location <i>End of Chase St</i>	☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**	
	Field ID <i>5</i>	☒ Grab	Date <i>5/12/14</i>	Time <i>10:20</i>	<i>Central</i>	Date		Time
	Matrix (include type e.g. Salt, Fresh, etc) <i>salt</i>	Temp (C) <i>26.23</i>	pH <i>7.41</i>	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <i>1.38</i>	Storet Station Number <i>330252655</i>		
	Sample Depth ☒ m <i>.15</i> ☐ ft	☐ Salinity (PPTH)	NPDES Number					
Latitude <i>30°24'55.9"</i> ☐ dd ☒ dms	Longitude <i>87°11'52.9"</i> ☐ dd ☒ dms	Comments						

Lab ID *	Location <i>1/2 Muscogee and Hawthorne 400ft from shore</i>	☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**	
	Field ID <i>6</i>	☒ Grab	Date <i>5/12/14</i>	Time <i>10:26</i>	<i>Central</i>	Date		Time
	Matrix (include type e.g. Salt, Fresh, etc) <i>salt</i>	Temp (C) <i>26.25</i>	pH <i>7.42</i>	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <i>7.15</i>	Storet Station Number <i>330251656</i>		
	Sample Depth ☒ m <i>.15</i> ☐ ft	☐ Salinity (PPTH)	NPDES Number					
Latitude <i>30°24'47.4"</i> ☐ dd ☒ dms	Longitude <i>87°12'0"</i> ☐ dd ☒ dms	Comments						

Lab ID *	Location <i>1/2 Bridge and Port</i>	☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**	
	Field ID <i>7</i>	☒ Grab	Date <i>5/12/14</i>	Time <i>10:45</i>	<i>Central</i>	Date		Time
	Matrix (include type e.g. Salt, Fresh, etc) <i>salt</i>	Temp (C) <i>26.3</i>	pH <i>7.41</i>	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <i>7.74</i>	Storet Station Number <i>330258657</i>		
	Sample Depth ☒ m <i>.15</i> ☐ ft	☐ Salinity (PPTH)	NPDES Number					
Latitude <i>30°24'16.5"</i> ☐ dd ☒ dms	Longitude <i>87°11'52.1"</i> ☐ dd ☒ dms	Comments						

Lab ID *	Location <i>West of Stormdrain Inside Rocks</i>	☐ Comp	Collection (comp begin or grab)	Eastern	Composite end	Eastern	Bottle Group(s)**	
	Field ID <i>8</i>	☒ Grab	Date <i>5/12/14</i>	Time <i>10:10</i>	<i>Central</i>	Date		Time
	Matrix (include type e.g. Salt, Fresh, etc) <i>salt</i>	Temp (C)	pH	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) <i>6.88</i>	Storet Station Number <i>330252658</i>		
	Sample Depth ☒ m <i>.15</i> ☐ ft	☐ Salinity (PPTH)	NPDES Number					
Latitude <i>30°24'59.5"</i> ☐ dd ☒ dms	Longitude <i>87°11'52.7"</i> ☐ dd ☒ dms	Comments						

Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
			<i>[Signature]</i>	<i>5-12-14</i>				

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

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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: DISTRICT

Sampling Agency: FDEP

PMAS: 1306

Lab ID *	Location W end of Hawkshaw 100 ft S of Outfall	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 1120 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 9	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.65	Storet Station Number 330251659					
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 26.5	pH 7.56	Sample Depth ☒ m .15 ☐ ft	☐ 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 Between Marina and Outfall	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 1110 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 10	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.54	Storet Station Number 3302576510					
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 26.57	pH 7.55	Sample Depth ☒ m .15 ☐ ft	☐ 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 Entrance of Marina	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 1105 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 11	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.44	Storet Station Number 3302576511					
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 26.81	pH 7.49	Sample Depth ☒ m .15 ☐ ft	☐ 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 1/4 Between Bridge and Port	☐ Comp ☒ Grab	Collection (comp begin or grab) Eastern Date 5/12/14 Time 1052 Central	Composite end Date Time Eastern Central	Bottle Group(s)**			
Field ID 12	Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L) 7.77	Storet Station Number 3302576512					
Matrix (include type e.g. Salt, Fresh, etc) salt	Temp (C) 26.19	pH 7.38	Sample Depth ☒ m .15 ☐ ft	☐ Salinity (PPTH) ☒ Sp Conductance (umho/cm)	NPDES Number			
Latitude 30°24'25.5" ☐ 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

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** Please see reverse side for Bottle Group information.

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Request Number: RQ-2014-05-12-27

Project Greenshores

Central Laboratory Sample Submittal Form

Event ID *

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 <u>Inside Hanks Law Lagoon</u>	☐ Comp	Collection (comp begin or grab)	☒ Grab	Date <u>5/12/14</u>	Time <u>1135</u>	Eastern <u>Central</u>	Composite end	Date	Time	Eastern	Bottle Group(s)**
	Field ID <u>13</u>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number						
	Matrix (include type e.g. Salt, Fresh, etc) <u>Salt</u>	Temp (C) <u>26.79</u>	pH <u>7.21</u>	Sample Depth ☒ m <u>.15</u>	☐ ft	☐ Salinity (PPTH)	☒ Sp Conductance (umho/cm)		NPDES Number			
	Latitude <u>30°24'43.6"</u> ☐ dd ☒ dms	Longitude <u>87°12'8.7"</u> ☐ dd ☒ dms		Comments								
Lab ID *	Location <u>E of Stormdrain Inside PGS Site II</u>	☐ Comp	Collection (comp begin or grab)	☒ Grab	Date <u>5/12/14</u>	Time <u>1155</u>	Eastern <u>Central</u>	Composite end	Date	Time	Eastern	Bottle Group(s)**
	Field ID <u>14</u>	Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number						
	Matrix (include type e.g. Salt, Fresh, etc) <u>Salt</u>	Temp (C) <u>26.84</u>	pH <u>7.44</u>	Sample Depth ☒ m <u>.15</u>	☐ ft	☐ Salinity (PPTH)	☒ Sp Conductance (umho/cm)		NPDES Number			
	Latitude <u>30°24'47.2"</u> ☐ dd ☒ dms	Longitude <u>87°12'4.3"</u> ☐ dd ☒ dms		Comments								
Lab ID *	Location	☐ Comp	Collection (comp begin or grab)	☐ Grab	Date	Time	Eastern	Composite end	Date	Time	Eastern	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	Collection (comp begin or grab)	☐ Grab	Date	Time	Eastern	Composite end	Date	Time	Eastern	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: <u>[Signature]</u>	Date/Time <u>5-13-14</u>	Relinquished By:	Date/Time	Received By:	Date/Time
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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						

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						

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						

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					

Date of Request: 22-APR-2014
 Created By: BUNCH_CA On: 22-APR-2014
 Modified By: MILLER_EB On: 23-APR-2014
 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: 23-APR-2014
 Biology Request Reviewed By: MILLER_EB On: 23-APR-2014
 Sampling Kit Required: YES Ship on: 02-MAY-2014
 Sampling Kit Shipped: YES On: 29-APR-2014
 Sampling Kit Packed By: SHAIK_A
 Date to Receive Samples: 12-MAY-2014
 Received By: SHAIK_A On: 13-MAY-2014

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- 2014-05-12-27

Shipping Method: Red Exl Date/Time of Receipt: 05-13-14/9:30

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	0.5C		✓			18	
Red	1.6C		✓			18	
Red	2.4C		✓			18	
Red	3.8C		✓			18	
Red	1.9C		✓			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).

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 ☒

*Samples for W-BNA- Samples free of chlorine? Yes ☒ No ☒ NA ☒

*Samples for W-FUM- Samples free of chlorine? Yes ☒ No ☒ NA ☒

*Samples for W-AHB-AA-R- Samples free of chlorine? Yes ☒ No ☒ NA ☒

*Sample Volume Sufficient: Yes ☒ No ☒

Coolers Unpacked/Checked by: ATP Date: 5-13-14 NCRs (y/n)? _____

Event ID: Project Greenshores
NW-DIST-2014-05-13-01 (DISTRICT 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

FedEx Tracking Number 8053 0430 6883

Form 10 No. 0215

Recipient's Copy

5/12/14
Zach Schang
FDEP
160 W. Court St
Pns
State FL ZIP 32502
Internal Billing Reference

recipient's name SAMPLE RECEIVING Phone 850 245-8085
company FLORIDA DEP/CHEMISTRY SECTION
address 2600 BLAIRSTONE RD
cannot deliver to P.O. boxes or P.O. ZIP codes.
address TALLAHASSEE State FL ZIP 32399
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.

4 Express Package Service *To most locations.
NOTE: Service order has changed. Please select carefully.
Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight
2 or 3 Business Days
FedEx 2Day A.M.
FedEx 2Day
FedEx Express Saver

5 Packaging *Declared value limit \$500.
FedEx Envelope* FedEx Pak* FedEx Box FedEx Tube Other

6 Special Handling and Delivery Signature Options
SATURDAY Delivery
No Signature Required
Direct Signature
Indirect Signature
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
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
10.85 50 lbs.
Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

FedEx Tracking Number 8053 0430 6894

Form 10 No. 0215

Recipient's Copy

5/12/14
Zach Schang
FDEP
160 W. Court St.
Pns
State FL ZIP 32502
Internal Billing Reference

recipient's name SAMPLE RECEIVING Phone 850 245-8085
company FLORIDA DEP/CHEMISTRY SECTION
address 2600 BLAIRSTONE RD
cannot deliver to P.O. boxes or P.O. ZIP codes.
address TALLAHASSEE State FL ZIP 32399
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.

4 Express Package Service *To most locations.
NOTE: Service order has changed. Please select carefully.
Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight
2 or 3 Business Days
FedEx 2Day A.M.
FedEx 2Day
FedEx Express Saver

5 Packaging *Declared value limit \$500.
FedEx Envelope* FedEx Pak* FedEx Box FedEx Tube Other

6 Special Handling and Delivery Signature Options
SATURDAY Delivery
No Signature Required
Direct Signature
Indirect Signature
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
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
10.85 50 lbs.
Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

dEx Express Package US Airbill

FedEx Tracking Number

8053 0430 6910

5/12/14
Zach Schang

Phone 850 595-0599

FDEP

160 W. Galt St

308
Dept./Floor/Suite/Room

FL ZIP 32502

Internal Billing Reference

SAMPLE RECEIVING

Phone 850 245-8085

FLORIDA DEP/CHEMISTRY SECTION

2600 BLAIRSTONE RD

Dept./Floor/Suite/Room

TALLAHASSEE

State FL ZIP 32399

0113454697



8053 0430 6910

Form ID No.

0215

Recipient's Copy

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 lbs.

☐ 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 465

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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Ex Express Package US Airbill

FedEx Tracking Number

8053 0430 6920

12/14
Zach Schang

Phone 850 595-0599

FDEP

160 W. Galt St

308
Dept./Floor/Suite/Room

FL ZIP 32502

Internal Billing Reference

SAMPLE RECEIVING

Phone 850 245-8085

FLORIDA DEP/CHEMISTRY SECTION

2600 BLAIRSTONE RD

Dept./Floor/Suite/Room

TALLAHASSEE

State FL ZIP 32399

0113454697



8053 0430 6920

Form ID No.

0215

Recipient's Copy

Express Package Service

* To most locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.
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FedEx Express Freight US Airbill.

Next Business Day

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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

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

☐ Dry Ice
Dry Ice, 9, UN 1845 x lbs.

☐ 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 465

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.



FedEx.com 1.800.GoFedEx 1.800.453.3339

FedEx Package
Express US Airbill
FedEx
Tracking
Number

8053 0430 6909

1 From

Date

5/12/14

Sender's
Name

Zach Schang

Phone

850 595 0599

Company

F-DEP

Address

160 W. Gault St

Dept./Floor/Suite/Room

City

Pns.

State

FL

ZIP

72502

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone

850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 BLAIRSTONE RD

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

Dept./Floor/Suite/Room

Address

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

City

TALLAHASSEE

State

FL

ZIP

32399

0113454697



8053 0430 6909

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.

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FedEx Express Freight US Airbill.

Next Business Day

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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

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NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

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☐ Direct SignatureSomeone at recipient's address may sign for delivery. *Fee applies.*☐ Indirect SignatureIf 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, 3, 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

Total Packages

Total Weight

3015

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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