FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

PAGE 1 OF 1

Data Qualified? Yes / No

STORET Station Name: _____ **Date:** _____ (mm/dd/yyyy)

STORET Station ID: _____ 12/29/2016 WBID 2081

G2SD0016 Field ID ▲

STORET ▼ G2SD0016

County: Charlotte **RQ -** ___ 2081 @ Burnt Store Road

Latitude: _____ (Decimal Degrees)

Longitude: _____ (Decimal Degrees)

Receiving Body of Water: _____ **Field ID:** _____

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Rosemary Murphy			✓		
Corey Anderson	✓				

Sampling Equipment

☐ Sample Container ☐ Van Dorn ☐ Pole
☐ Carboy ☐ Syringe
☐ Dipper ☐ Other _____

Equipment ID _____

Collection Method

☐ Wading
☒ From Shore
☐ Other (note below)

Via Boat: ☐ Canoe/Kayak ☐ Electric Motor ☐ Gasoline Motor

Water Level: Dry / Pooled / (Low) / Normal / High / Flooded

Matrix: (Fresh) / Marine / DI

Meter ID# YSI 5 **Photos:** Yes / (No)

Tide Falling: Yes / No / (NA)

Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (µmhos/cm)	Temp. (C°)
(EST)	0850	0.3	0.3	8.9	96	8.0	–	0.3 VOB	527	18.8
CEN							–			

Biological Samples Collected: (None) HA SCI RPS Algae ID LVS LVI Other _____

SBIO ID Numbers: SBIO-ID: RPS-ID: Macrophyte-ID: LIMS#:

STORET Station Name: _____ **Date:** _____ (mm/dd/yyyy)

STORET Station ID: _____ 12/29/2016 WBID 2074

G2SD25010009 Field ID ▲

STORET ▼ 25010009*

County: Charlotte **RQ -** ___ Alligator Cr South Branch @SR768

Latitude: _____ (Decimal Degrees)

Longitude: _____ (Decimal Degrees)

Receiving Body of Water:

Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (µmhos/cm)	Temp. (C°)
(EST)	0900	0.3	0.6	3.2	36	7.3	–	0.6 VOB	1166	22.0
CEN										

Biological Samples Collected: (None) HA SCI RPS Algae ID LVS LVI Other _____

SBIO ID Numbers: SBIO-ID: RPS-ID: Macrophyte-ID: LIMS#:

Notes: Field Readings only

Place Label Here (If Available)

Signature: Rosemary Murphy Date: 12/29/16

Field Parameters Entered into LIMS: _____ (Initials/Date) Field Parameters QC in LIMS: _____ (Initials/Date)

Date Migrated to STORET: _____ (Initials/Date) Field Sheets Scanned/Saved: _____ (Initials/Date)