

SMP: Highlands Lakes

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SO-DIST

Requester: Benjamin Paswater

Field Report Prepared By:

Project ID: SMP

Collected By:

Sampling Agency:

cliff Ford
Highlands County

RQ-2016-05-02-36				☐ Comp	Collection (comp begin or grab)		☒ Grab	Date	Time	Eastern	Composite end	Bottle Group(s)	
WBID 1938		G4HL052016-4		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Date		Time	(See pg 2)		
Lake Henry @ SW side		STORET G4SD0120		Fresh		109.2		5/24/16		9:05	A		
Temp (C)		pH		Sample Depth		Sp. Conductance		Total Res. Chlorine					
28.40		7.79		0.5		not cal		1.9					
Latitude		Longitude		Salinity (ppt)		Comments							
☐ dd		☐ dms		☐ dd		☐ dms							
RQ-2016-05-02-36				☐ Comp	Collection (comp begin or grab)		☒ Grab	Date	Time	Eastern	Composite end	Bottle Group(s)	
WBID 1938		G4HL052016-5		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Date		Time	(See pg 2)		
Lake Henry @ Northside		STORET G4SD0121		Fresh		110.1		5/24/16		9:45	A		
Temp (C)		pH		Sample Depth		Sp. Conductance		Total Res. Chlorine					
28.92		7.72		0.5		not cal		1.9					
Latitude		Longitude		Salinity (ppt)		Comments							
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Location		Field ID		STORET #		Latitude		Longitude		Salinity (ppt)		Comments	
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Group: A Bottle Type: P-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

ALKALINITY

TURBIDITY

W-CL-IC

W-COLOR

W-F

W-SO4-IC

W-TDS

W-TSS

Group: A Bottle Type: P-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

~~BOD-UNIN~~

Group: A Bottle Type: BP-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 16 Preservative: ICE And H2SO4 Enter Number of Bottles Sent to Lab _____

W-NH3

W-NO2NO3

W-S-A-TP

W-TKN

W-TOC

Group: A Bottle Type: P-125ML # of Bottles: 16 Preservative: ICE-FLTR Enter Number of Bottles Sent to Lab _____

W-PO4-F

SMP: Highlands Lakes

last revised Apr 7, 2016

Central Laboratory Submittal Form

Customer: SO-DIST

Requester: Benjamin Paswater

Field Report Prepared By: Clell Ford

Project ID: SMP

Collected By: Clell FordSampling Agency: Highlands County

RQ-2016-05-02-36		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>5/24/16</u> Time <u>11:05</u>		<u>Eastern</u> Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)	
1932D Pearl Lake @ Southside		G4HL052016-8 Field ID STORET G4SD0135		Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>		Diss. Oxygen <u>100.8</u>		☐ mg/L ☒ % sat		Total Res. Chlorine (mg/L) <u>na</u>	
		Temp (C) <u>28.75</u>		pH <u>6.98</u>		Sample Depth <u>0.5</u>		☒ ft ☐ m		Sp. Conductance (umho/cm) <u>not cal</u>	
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt) <u>na</u>		Comments					
RQ-2016-05-02-36		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>5/24/16</u> Time <u>11:20</u>		<u>Eastern</u> Central		Composite end Date _____ Time _____		Bottle Group(s)	
1932D Pearl Lake @ Eastside		G4HL052016-7 Field ID STORET G4SD0134		Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>		Diss. Oxygen <u>98.7</u>		☐ mg/L ☒ % sat		Total Res. Chlorine (mg/L) <u>na</u>	
		Temp (C) <u>28.63</u>		pH <u>6.82</u>		Sample Depth <u>0.5</u>		☒ ft ☐ m		Sp. Conductance (umho/cm) <u>not cal</u>	
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt) <u>na</u>		Comments					
RQ-2016-05-02-36		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>5/24/16</u> Time <u>11:25</u>		<u>Eastern</u> Central		Composite end Date _____ Time _____		Bottle Group(s)	
1932D Pearl Lake @ Northside		G4HL052016-6 Field ID STORET G4SD0133		Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>		Diss. Oxygen <u>104.3</u>		☐ mg/L ☒ % sat		Total Res. Chlorine (mg/L) <u>na</u>	
		Temp (C) <u>29.10</u>		pH <u>6.80</u>		Sample Depth <u>0.5</u>		☒ ft ☐ m		Sp. Conductance (umho/cm) <u>not cal</u>	
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt) <u>na</u>		Comments					
Location		☐ Comp ☐ Grab		Collection (comp begin or grab) Date _____ Time _____		<u>Eastern</u> Central		Composite end Date _____ Time _____		Bottle Group(s)	
Field ID				Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
STORET #				Temp (C)		pH		Sample Depth		☐ ft ☐ m Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt)		Comments					

Relinquished By: <u>gca</u>	Date/Time: <u>5/24/16/15:00</u>	Shipping Method: <u>Fed Ex</u>	Number of Coolers Shipped: _____	Received By: <u>AFB</u>	Date/Time: <u>05-25-16/10:00</u>
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Group: A Bottle Type: P-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

ALKALINITY
TURBIDITY

W-COLOR

W-F

W-SO4-IC

W-TDS

W-TSS

Group: A Bottle Type: P-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

BOD-UNIN

Group: A Bottle Type: BP-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 16 Preservative: ICE And H2SO4 Enter Number of Bottles Sent to Lab _____

W-NH3

W-NO2NO3

W-S-A-TP

W-TKN

W-TOC

Group: A Bottle Type: P-125ML # of Bottles: 16 Preservative: ICE-FLTR Enter Number of Bottles Sent to Lab _____

W-PO4-F

Florida Department of Environmental Protection
Central Laboratory Submittal Form

SMP: Highlands Lakes

last revised Apr 7, 2016

Customer: SO-DIST

Requester: Benjamin Paswater

Field Report Prepared By:

dell Ford

Project ID: SMP

Collected By:

dell Ford

Sampling Agency:

Highlands County

RQ-2016-05-02-36		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>5/24/16</u> Time <u>11:00</u>	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
1932D Pearl Lake @ Center	G4HL052016-10 Field ID ▲ STORET ▼ G4SD0137 	Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>	Diss. Oxygen <u>103.9</u>	☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L) <u>na</u>	<u>A</u>
		Temp (C) <u>28.69</u>	pH <u>7.16</u>	Sample Depth <u>0.5</u> ☐ ft ☐ m	Sp. Conductance (umho/cm) <u>not cal</u>	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) ☐ dms	Comments			
RQ-2016-05-02-36		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>5/24/16</u> Time <u>10:50</u>	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
1932D Pearl Lake @ Westside	G4HL052016-9 Field ID ▲ STORET ▼ G4SD0136 	Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>	Diss. Oxygen <u>102.8</u>	☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L) <u>na</u>	<u>A</u>
		Temp (C) <u>28.97</u>	pH <u>7.28</u>	Sample Depth <u>0.5</u> ☐ ft ☐ m	Sp. Conductance (umho/cm) <u>not cal</u>	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) ☐ dms	Comments			
Location	☐ Comp ☐ Grab		Collection (comp begin or grab) Date _____ Time _____	☐ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #	Temp (C)		pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) ☐ dms	Comments			
Location	☐ Comp ☐ Grab		Collection (comp begin or grab) Date _____ Time _____	☐ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #	Temp (C)		pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) ☐ dms	Comments			

Relinquished By: <u>Jed</u>	Date/Time <u>5/24/16/1500</u>	Shipping Method <u>Fed Ex</u>	Number of Coolers Shipped:	Received By: <u>AFB</u>	Date/Time <u>05-25-16/1100</u>
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Group: A Bottle Type: P-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

ALKALINITY

TURBIDITY

W-CL-IC

W-COLOR

W-F

W-SO4-IC

W-TDS

W-TSS

Group: A Bottle Type: P-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

BOD-UNIN

Group: A Bottle Type: BP-1L # of Bottles: 16 Preservative: ICE Enter Number of Bottles Sent to Lab _____

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 16 Preservative: ICE And H2SO4 Enter Number of Bottles Sent to Lab _____

W-NH3

W-NO2NO3

W-S-A-TP

W-TKN

W-TOC

Group: A Bottle Type: P-125ML # of Bottles: 16 Preservative: ICE-FLTR Enter Number of Bottles Sent to Lab _____

W-PO4-F

Date of Request: 11-APR-2016
 Created By: PASWATER_B On: 11-APR-2016
 Modified By: SWANSON_C On: 13-APR-2016
 Customer: SO-DIST
 Project: SMP
 Division: Not Applicable
 District: South District
 Sampling Event: SMP: Highlands Lakes

Send Coolers To:

Phone: (863) 402-6545
 4344 George Blvd.

 Sebring, FL 33875
 Attn: Clell Ford

Program Module Number:
 Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 12-APR-2016
 Biology Request Reviewed By: SWANSON_C On: 13-APR-2016
 Sampling Kit Required: YES Ship on: 22-APR-2016
 Sampling Kit Shipped: YES On: 22-APR-2016
 Sampling Kit Packed By: BOWDEN_M
 Preservatives Needed: YES
 Date to Receive Samples: 02-MAY-2016
 Received By: SHAIK_A On: 25-MAY-2016

Send Final Report To:

FLDEP South District Office
 2295 Victoria Ave. Suite 364
 Fort Myers, FL 33901
 Attn: Ben Paswater

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

Comments: SMP: Highlands Lakes
 Pearl
 Hill
 Persimmon
 Pythias
 Henry
 Sirena

1 - case of Sulfuric Acid

Bottle Group A (Water) With 16 Samples:

Bottle Type: P-1L	Number of Bottles: 16	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-CL-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Chloride in aqueous matrices
W-COLOR	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
Color (true)		
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO ₄ -IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: P-1L	Number of Bottles: 16	Preserved With: ICE
BOD-UNIN	Template: DEFAULT	(SM 5210 B) BOD, NOT nitrogen-inhibited
Bottle Type: BP-1L	Number of Bottles: 16	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 16	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	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
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices

Bottle Group A (Water) With 16 Samples:

Bottle Type: P-125ML Number of Bottles: 16 Preserved With: ICE-FLTR
W-PO4-F Template: DEFAULT (EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Log-in Checklist

RQ- 2016-05-02-36

Shipping Method: Fed Exp

Date/Time of Receipt: 05-25-16/10:00

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
Red	2.1C	8		/			
Red	0.5C	12		//			
Red	1.8C	8					

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

****Note:** If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

****Chain of Custody/ Field Sheet(s) Included?** Yes / No

CONTAINER CHECK

****Evidence Tape on Bottles?** Yes No / If yes, is it intact? Yes No

****Caps on tight?** Yes / No ****Containers intact?** Yes / No

****Sufficient Sample Volume:** Yes / No

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R					

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

****Acid Preserved Samples:** pH ≤ 2.0? Yes / No NA Init: AP

****W-1-4-DIOX (Green dot on container) preserved to pH < 4.0?** Yes No / NA / Init:

Coolers Unpacked/Checked by: AP Date: 5-25-16 NCRs (Y/N)? /

Event ID: SMP: Highlands Lakes NCR #

SO-DIST-2016-05-25-05 (SMP)

Date Received: 25-MAY-2016 10:00

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

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

Were Encore samples received? Yes_____ No_____

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes_____ No_____

If no, were samples shipped on dry ice? Yes_____ No_____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____

Additional Comments:

124/16
Crell Ford
Highlands County
4344 George Blvd
Sebring
State FL ZIP 33875
Internal Billing Reference

SAMPLE RECEIVING Phone 850 245-8085
FLORIDA DEP/CHEMISTRY SECTION
600 BLAIRSTONE RD
HOLD location address or for continuation of your shipping address.
TALLAHASSEE State FL ZIP 32399
0122645602

5/24/16
Crell Ford
Highlands County
4344 George Blvd
Sebring
State FL ZIP 33875
Internal Billing Reference

SAMPLE RECEIVING Phone 850 245-8085
FLORIDA DEP/CHEMISTRY SECTION
2600 BLAIRSTONE RD
HOLD location address or for continuation of your shipping address.
TALLAHASSEE State FL ZIP 32399
012344864

Form ID No. 0215

4 Express Package Service *To most locations. Packages up to 150 lbs. For packages over 150 lbs., use the FedEx Express Freight US Airbill.

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 Fees may apply. See the FedEx Service Guide.
☐ Saturday Delivery
☐ No Signature Required
☐ Direct Signature
☐ Indirect Signature
Does this shipment contain dangerous goods?
☐ No ☒ Yes
Restrictions apply for dangerous goods — see the current FedEx Service Guide.

7 Payment Bill to:
Sender ☐ Recipient ☒ Third Party ☐ Credit Card ☐ Cash/Check
Total Packages 1 Total Weight 59 lbs.
Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

Form ID No. 0215

4 Express Package Service *To most locations. Packages up to 150 lbs. For packages over 150 lbs., use the FedEx Express Freight US Airbill.

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 Fees may apply. See the FedEx Service Guide.
☐ Saturday Delivery
☐ No Signature Required
☐ Direct Signature
☒ Indirect Signature
Does this shipment contain dangerous goods?
☐ No ☐ Yes
Restrictions apply for dangerous goods — see the current FedEx Service Guide.

7 Payment Bill to:
Sender ☐ Recipient ☒ Third Party ☐ Credit Card ☐ Cash/Check
Total Packages 1 Total Weight 64 lbs.
Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

fedex.com 1800.GoFedEx 1800.463.3339

fedex.com 1800.GoFedEx 1800.463.3339

01000

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

8099 4719 6229

Form
ID No.

0215

16378

fedex.com 1800.GoFedEx 1800.463.3339

1 From **5/24/16**

Date **5/24/16**

Sender's Name **C101 Ford** Phone **863 402 6515**

Company **Highlands County**

Address **224344 George Blvd**

City **Sebring** State **FL** ZIP **33879**

2 Your Internal Billing Reference

3 To Recipient's Name **SAMPLE RECEIVING** Phone **850 245-3085**

Company **FLORIDA DEP/CHEMISTRY SECTION**

Address **2600 BLAIRSTONE RD**

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.

0122645602



8099 4719 6229

4 Express Package Service

* To meet locations.

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 day. 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 Fees may apply. See the FedEx Service Guide.

- ☐ 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.

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

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
- Restrictions apply for dangerous goods — see the current FedEx Service Guide.
- ☐ 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 **1** Total Weight **55** 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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611