



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

February 2016

PAGE 1 OF 2

Data Qualified?

Yes 1 No 0

STORET Station Name: WEEKI WACHEE RIVER GREEN 41

Date: 8-2-16
(mm/dd/yyyy)

STORET Station ID: 65SW0020

Latitude: 28.53314

(Decimal Degrees)

WBID: 13821 RQ: 2016-08-01-32

ORG ID: 21KLTPTA

Longitude: 82.64275

(Decimal Degrees)

Receiving Body of Water: COM

Field ID: 65SW0020

County: HERNANDO

RQ-2016-08-01-32 Date: 08/02/2016 Time:		G5SW0020		Sample Collection		Documentation		Preservation		Preservation Check		Duplicate Collection		Blank Collection	
JULY 13TH, 2016 STEVEN CLINCKEN				X		X		X		X		X		X	
Water Level: Dry / Low / <u>Normal</u> / High / Flooded		Matrix: Fresh / <u>Marine</u> / DI		Tide Falling: Yes / <u>No</u> / NA		Sampling Equipment		Collection Method							
Meter ID# <u>BLS1A</u>		Photos: Yes / <u>No</u>				☒ Sample Container ☐ Van Dorn ☐ Pole		☐ Wading ☐ Via Boat							
						☐ Carboy ☒ Syringe		☐ From Shore ☐ Canoe/Kayak							
						☐ Dipper ☐ Other		☒ Other (note below) <u>1000 BBL</u>							
								☐ Electric Motor							
								☒ Gasoline Motor							

Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (umhos/cm)	Temp (C)
EST	12:30	0.3	1.5	5.4	79	7.7	17.6	1.5	28710	29.9
CEN								"S"		

Biological Samples Collected: <u>None</u> HA SCI LVS RPS LVI Other						
Parameter Suite	Parameter Methods		Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	☒ TKN / TP / NH ₄ / NO ₃ / TOC	☐ Other	☒ Ice ☒ H ₂ SO ₄			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP		☐ Ice ☐ HNO ₃			☒ <2
Filtered Nutrients	☒ OP ☒ Field Filtered 0.45 µm Filter		☒ Ice			
Chlorophyll	☒ CHLSUITE-W		☒ Ice			
BOD	☐ BOD-INHB ☐ BOD-UNIN		☐ Ice			
Physical/Aggregate	☒ TSS / Turbidity / Alkalinity / Color	☐ Other	☒ Ice			
Macroinvertebrates	☐ MF-FW-QLDC		☐ Formalin			
Microbiology	☐ E Coli ☐ F Coli ☐ Entero ☐ QPCR		☐ Ice			
Periphyton	☐ ALGAE-ID		☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R		☐ Ice			
	☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH		☐ Other			

Contains 1:1 Sulfuric Acid SA-6168040 EXP: 06/16/17 Warning! See SDS

QA/QC Sample Information

Duplicate

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Time Zone: EST CEN Sample Depth (m): 0.3 Field ID: 655W0020
 Time: 12:35 Total Depth (m): 1.5

Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	☒ TKN / TP / Nox / NH3 / TOC ☐ Other _____	☒ Ice ☒ H ₂ SO ₄			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO ₃			☒ <2
Filtered Nutrients	☒ OP ☒ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
BOD	☐ BOD-INHB ☐ BOD-UNIN	☐ Ice			
Physical/Aggregate	☒ TSS / Turbidity / Alkalinity / Color ☐ Other _____	☒ Ice			
Microbiology	☐ E Coli ☐ F Coli ☐ Entero ☐ QPCR	☐ Ice			
Pesticides	RQ-2016-08-01-32 Date: 08/02/2016 Time: <u>12:35</u> 655W0020 Duplicate	☐ Ice ☐ Other _____			

Contains 1:1 Sulfuric Acid SA-6168040 EXP: 06/16/17 Warning! See SDS

Blank

655W0020

Time Zone: EST CEN Time: 13:00 Field ID: BLANK Location: FIELD

☒ Field Blank ☐ Equipment Blank ☐ Field Cleaned Equipment Blank Equipment ID: _____

Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	☒ TKN / TP / Nox / NH3 / TOC ☐ Other _____	☒ Ice ☒ H ₂ SO ₄			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO ₃			☒ <2
Filtered Nutrients	☒ OP ☒ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
BOD	☐ BOD-INHB ☐ BOD-UNIN	☐ Ice			
Physical/Aggregate	☒ TSS / Turbidity / Alkalinity / Color ☐ Other _____	☒ Ice			
Microbiology	☐ E Coli ☐ F Coli ☐ Entero ☐ QPCR	☐ Ice			
Pesticides	RQ-2016-08-01-32 Date: 08/02/2016 Time: _____ Blank	☐ Ice ☐ Other _____			

Contains 1:1 Sulfuric Acid SA-6168040 EXP: 06/16/17 Warning! See SDS

Notes:

STRONG CURRENT
INCOMING TIDE

Place Label Here
(If Available)

Signature:

[Signature]

Date:

8-2-16

Field Parameters Entered into LIMS:

(Initials/Date)

Field Parameters QC in LIMS:

(Initials/Date)

Date Migrated to STORET:

(Initials/Date)

Field Sheets Scanned/Saved:

18 8/8/16
(Initials/Date)



Package
US Airbill

FedEx
Tracking
Number

8094 7803 3282

1 From Please print and press hard.

Date 08/02/2011 Sender's FedEx Account Number

Sender's Name

FDEP

Phone 813 1470-5770

Company

Address

13051 N. Telecom Pkwy

City

Temple Terrace

State

FL

ZIP 33637

2 Your Internal Billing Reference

Form 51 characters will appear on bill of lading.

3 To

Recipient's Name

Phone 850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 BLAIRSTONE RD

We cannot deliver to PO, boxes or PD, ZIP codes.

Dep./Floor/SubRoom

Address

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

City

TALLAHASSEE

State

FL

ZIP 32399

0121555852



Ship it. Track it. Pay for it. All online.
Go to fedex.com

PULL AND RETAIN THIS COPY BEFORE AFFIXING TO THE PACKAGE. NO POUCH NEEDED.

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
Next business day by 8:00 a.m. delivery to select
businesses. Friday shipments will be delivered on
Monday unless Saturday Delivery is selected.

☒ FedEx Priority Overnight
Next business day by 10:00 a.m. delivery to select
businesses. Friday shipments will be delivered on
Monday unless Saturday Delivery is selected.

☐ FedEx Standard Overnight
Next business afternoon delivery to select
businesses. Saturday Delivery NOT available.

2 or 3 Business Days

☐ FedEx 2Day A.M.
Saturday Delivery NOT available.

☐ FedEx 2Day
Saturday Delivery NOT available. * Thursday shipments
will be delivered on Monday unless Saturday
Delivery is selected.

☐ FedEx Express Saver
Tuesday through Thursday delivery to select
businesses. 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
signature at recipient's address.

☐ Direct Signature

Someone at recipient's address
must sign for delivery.

☐ Indirect Signature

Signature of someone at recipient's address
may sign for delivery. For
residential deliveries only.

Does this shipment contain dangerous goods?

☐ No ☐ Yes

As per attached
Shipper's Declaration,
no restriction.

☐ Dry Ice

Dry Ice, 9, UN 1845

☐ Cargo Aircraft Only

7 Payment Bill to:

Sender

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

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

FedEx Acct. No. 4490-2262-9

Card No.

Exp. Date

Total Packages Total Weight Total Declared Value*

50 lbs. \$ 0.00

*Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this airbill you
agree to the terms and conditions of the back of this airbill and in the current FedEx Service Guide, including terms
pertaining to liability.

Rev. Date 5/15 • Form #61334 • ©1994-2015 FedEx • PRINTED IN U.S.A. SPN

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Field Report Prepared By:

Collected By:

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
<i>James A. ...</i>	8-2-16 18:15	<i>Box 42</i>	<i>1</i>		

Shipping Method

Number of Coolers Shipped:

Date/Time

B-2-16 (8:50)

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