



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

February 2016

A-KIT

PAGE 1 OF 1

Data Qualified?
Yes / No

STORET Station Name: GREEN LAKE N

Date: 11/21/2016
(mm/dd/yyyy)

STORET Station ID: G5SW0107

Latitude: 28° 19' 03.8" N
(Decimal Degrees)

WBID: 1423 B RQ- 2016-11-21-43 ORG ID: 21FLTPA

Longitude: -82° 30' 13.63" W
(Decimal Degrees)

Receiving Body of Water: _____ Field ID: G5SW0107

County: Pasco

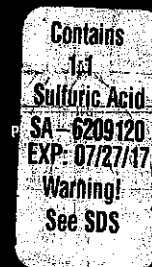
Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Stephen Clinger		X	X	X	X	X
Judy Ashton			X	X		

Sampling Equipment		
☒ Sample Container	☐ Van Dorn	☐ Pole
☐ Carboy	☒ Syringe	
☐ Dipper	☐ Other	
Equipment ID		
Collection Method		
☐ Wading	☒ Via Boat	
☐ From Shore	☒ Canoe/Kayak	
☐ Other (note below)	☒ Electric Motor	
☐ Gasoline Motor		

Water Level: Dry / Low / Normal / High / Flooded Matrix: Fresh / Marine / DI
Meter ID# WEEZY 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 (umhos/cm)	Temp. (C°)
EST	1210 1030	0.3	2.3	6.2	67	6.4	-	2.2	97	19.6
CEN		2.3		7.0	75	6.4	-		97	18.9

Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H2SO4			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO3			☐ <2
Filtered Nutrients	☒ W-PO4-F ☒ Field Filtered 0.45 um Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
BOD	☐ BOD-UNIN	☐ Ice			
Physical/Aggregate (Kit A)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CHC / W-COLOR / W-SO4-IC / W-TDS	☒ Ice			
Physical/Aggregate (Kit B)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QLDC	☐ Formalin			
Microbiology	☐ E Coli ☐ F Coli ☐ Enteroc ☐ QPCR	☐ Ice			
Periphyton	☐ ALGAE-ID	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other			
Flow m/s	"J" Quality Flow				



Notes: Secchi 2.2 because of veg. would be vob otherwise

RQ-2016-11-21-43
Date: 11/21/2016 Field ID: G5SW0107
Time: _____
STORET: G5SW0107

Signature: [Signature] Date: 11/21/2016

Field Parameters Entered into LIMS: SC 11/21/2016 Field Parameters QC in LIMS: SC 01-05-17
Date Migrated to STORET: _____ Field Sheets Scanned/Saved: _____

Request Number: RQ-2016-11-07-48

Florida Department of Environmental Protection Central Laboratory Submittal Form

Page 1 of 2

last revised Apr 7, 2016

Customer: SW-DIST

Requester: Judy Ashton

Field Report Prepared By:

Judy Ashton

Project ID: SMP

Collected By:

J. Ashton, S. Cumberland

Sampling Agency:

FDEP

Location <u>GREEN LAKE N</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>11-21-16</u> Time <u>12:10</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Field ID RQ-2016-11-21-43 Date: 11/21/2016 Field ID: <u>G5SW0107</u>	Matrix (type, e.g., Salt, <u>Fresh</u> , etc)		Diss. Oxygen <u>6.2</u> ☒ mg/L <u>67</u> ☒ % sat	Total Res. Chlorine (mg/L) _____		A
STORET # Time: _____ STORET: <u>G5SW0107</u>	Temp (C) <u>19.6</u>	pH <u>6.4</u>	Sample Depth <u>0.3</u> ☐ ft ☒ m	Sp. Conductance (umho/cm) <u>97</u>		
Latitude _____	☐ dd ☐ dms Salinity (ppt) _____		Comments _____			
Location <u>GREEN LAKE S</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>11-21-16</u> Time <u>12:00</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID RQ-2016-11-21-43 Date: 11/21/2016 Field ID: <u>G5SW0108</u>	Matrix (type, e.g., Salt, <u>Fresh</u> , etc)		Diss. Oxygen <u>6.6</u> ☒ mg/L <u>71</u> ☒ % sat	Total Res. Chlorine (mg/L) _____		A
STORET # Time: _____ STORET: <u>G5SW0108</u>	Temp (C) <u>19.5</u>	pH <u>6.3</u>	Sample Depth <u>0.3</u> ☐ ft ☒ m	Sp. Conductance (umho/cm) <u>97</u>		
Latitude _____	☐ dd ☐ dms Salinity (ppt) _____		Comments _____			
Location <u>BEAR CREEK</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>11-21-16</u> Time <u>10:30</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID RQ-2016-11-21-43 Date: 11/21/2016 Field ID: <u>G1SW0044</u>	Matrix (type, e.g., Salt, <u>Fresh</u> , etc)		Diss. Oxygen <u>10.7</u> ☒ mg/L <u>115</u> ☒ % sat	Total Res. Chlorine (mg/L) _____		A
STORET # Time: _____ STORET: <u>24030127</u>	Temp (C) <u>18.8</u>	pH <u>8.4</u>	Sample Depth <u>0.3</u> ☐ ft ☒ m	Sp. Conductance (umho/cm) <u>132</u>		
Latitude _____	☐ dd ☐ dms Salinity (ppt) _____		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, <u>Fresh</u> , 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>Judy Ashton</u>	Date/Time <u>11-21-16 1700</u>	Shipping Method <u>Fed Ex</u>	Number of Coolers Shipped: <u>1</u>	Received By:	Date/Time
--	-----------------------------------	----------------------------------	--	--------------	-----------

Group: A	Bottle Type:	P-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>3</u>
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>3</u>
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 5	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	<u>3</u>
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 5	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	<u>3</u>
	W-PO4-F						

FedEx
Tracking
Number

8104 1261 8418

From Please print and press hard.

Date 11/21/16 Sender's FedEx
Account Number

Sender's Name FIDEP Phone (813) 470-5700

Company

Address 13051 N. TELFORD PKWY Dept./Floor/Suite/Room

City TEMPLE TERRACE State FL ZIP 33637

Your Internal Billing Reference

First 24 characters will appear on invoice.

To

Recipient's Name SAMPLE RECEIVING Phone (850) 245-8085

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2400 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 32399-6542

0124452242

Deliveries when and where you want.
Learn about FedEx Delivery Manager at fedex.com/deliveryForm
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
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.

2nd Business Day

☐ 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 x kg

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.

☐ Sender
Acct. No. in Section
I will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/CheckFedEx Acct. No.
Credit Card No. 4490-2262-7Exp.
Date

Total Packages Total Weight Total Declared Value*

1 50 lbs. \$ 00

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

Rev. Date 5/15 • Part #163134 • ©1984-2015 FedEx • PRINTED IN U.S.A. SRA

611

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