



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: KLOSTERMAN BAYOU N

Date: 10/18/2016
(mm/dd/yyyy)

STORET Station ID: 280652708245456

Latitude: 28.11466 N
(Decimal Degrees)

WBID: 1508A RQ- 2016-10-17-30

ORG ID: 21FLTPA

Longitude: -82.76268 W
(Decimal Degrees)

Receiving Body of Water: _____

Field ID: G5SW0039

County: PINELAS

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Stephen Clingerman		X		X		
Jody Ashton			X		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# 61130N 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	0955	0.3		9.4	119	7.2	0.4		748	26.0
			0.6					0.4		
CEN				6.2	77					

Biological Samples Collected: None HA SCI LVS RPS LVI Other _____

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-PW-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			

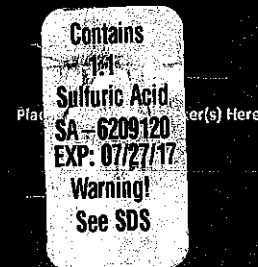
Flow m/s _____ "J" Qualify Flow _____

Notes:	RQ-2016-10-17-30 Date: 10/18/2016 Field ID: <u>G5SW0039</u> Time: _____ STORET: <u>280652708245456</u>
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Signature: [Signature] Date: 10/18/2016

Field Parameters Entered into LIMS: SC 11/18/16 Field Parameters QC in LIMS: SC 01-04-17 CE 11/17
(Initials/Date) (Initials/Date)

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



Requester: Judy Ashton

Field Report Prepared By:

Collected By: J. Hester S. Lindeman

Sampling Agency:

21 FLTPA

[illegible]

Group: A	Bottle Type: ALKALINITY TURBIDITY W-CL-IC W-COLOR W-F W-SO4-IC W-TDS W-TSS	P-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: CHLSUITE-W	BP-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC	P-500ML	# of Bottles: 5	Preservative: ICE And H2SO4		Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: W-PO4-F	P-125ML	# of Bottles: 5	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	4

Package
US AirbillFedEx
Tracking
Number

8104 1261 7238

MR 4

From Please print and press hard.

Date 10/18/2016 Sender's FedEx
Account NumberSender's
Name EDEP Phone 813 1470-5700

Company

Address 13051 N. TELECOM 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/RoomAddress
Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE State FL ZIP 32309-6542

0124452242

Form
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4 Express Package Service

* To most locations.

Packages up to 150 lbs.
For packages over 150 lbs., use the
FedEx Express Freight US Airbill.

NO DELIVERY DAYS

☐ 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.

24/7 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 x kg

Restrictions apply for dangerous goods—see the current FedEx Service Guide.

☐ Cargo Aircraft Only

7 Payment Bill to:

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☐ Sender
Acct. No. in Section
1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/CheckFedEx Acct. No. 4470-2262-7
Credit Card No.Exp.
Date

Total Packages Total Weight Total Declared Value*

1 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
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that limit our liability.

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