

LSJR DowntownSalt

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NE-DIST

Requester: Jeremy M. Parrish

Field Report Prepared By: Alicia Hogue

Project ID: SMP

Collected By: Amy Kalmbacher, Brian Davis, Alicia Hogue Sampling Agency: DEP

Field ID:  G2NE0823 10112017 Pottsburg Cr. @ Beach Blvd. STORET:  20030815	☐ Comp ☒ Grab Collection (comp begin or grab) Date 10-11-2017 Time 0845 Eastern Central Composite end Date Time Matrix (type, e.g., Salt, Fresh, etc) fresh Diss. Oxygen 2.09 mg/L ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) Temp (C) 26.3 pH 7.15 Sample Depth 0.3 ☐ ft ☒ m Sp. Conductance (umho/cm) 301 Bottle Group(s) (See pg 2) A
Latitude 30.28725 dd dms Longitude 81.56981 dd dms Salinity (ppt) 0.14	Comments
Field ID:  G2NE0146 10112017 Big Fishweir Cr. @ Herschel St. STORET:  20030139	☐ Comp ☒ Grab Collection (comp begin or grab) Date 10-11-2017 Time 0930 Eastern Central Composite end Date Time Matrix (type, e.g., Salt, Fresh, etc) fresh Diss. Oxygen 1.14 ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) Temp (C) 27.0 pH 7.35 Sample Depth 0.3 ☐ ft ☒ m Sp. Conductance (umho/cm) 391 Bottle Group(s) A
Latitude 30.2900 dd dms Longitude 81.7135 dd dms Salinity (ppt) 0.19	Comments
Field ID:  G2NE0086 10112017 Ortega R Br @ Timuquana Rd. STORET:  20030079	☐ Comp ☒ Grab Collection (comp begin or grab) Date 10-11-2017 Time 1000 Eastern Central Composite end Date Time Matrix (type, e.g., Salt, Fresh, etc) fresh Diss. Oxygen 1.03 ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) Temp (C) 28.0 pH 7.53 Sample Depth 0.3 ☐ ft ☒ m Sp. Conductance (umho/cm) 187 Bottle Group(s) A, B
Latitude 30.2472 dd dms Longitude 81.7079 dd dms Salinity (ppt) 0.09	Comments
Field ID:  G2NE0601 10112017 Goodbys Creek @ Sanchez Rd. STORET:  20030594	☐ Comp ☒ Grab Collection (comp begin or grab) Date 10/11/17 Time 10:40 Eastern Central Composite end Date Time Matrix (type, e.g., Salt, Fresh, etc) fresh Diss. Oxygen 1.14 ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) Temp (C) 26.5 pH 7.39 Sample Depth 0.3 ☐ ft ☒ m Sp. Conductance (umho/cm) 334 Bottle Group(s) A
Latitude 30.2215 dd dms Longitude 81.6089 dd dms Salinity (ppt) 0.16	Comments

Relinquished By:	Date/Time 10-11-2017	Shipping Method fed ex	Number of Coolers Shipped:	Received By: J.D.	Date/Time 10/12/17 10:20
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* Sample collection date + time taken from
sample container.

Group: A	Bottle Type:	P-1L	# of Bottles: 5	Preservative: ICE	Enter Number of Bottles Sent to Lab	5
	ALKALINITY TURBIDITY W-F W-SO4-IC W-TSS					
Group: A	Bottle Type:	BP-1L	# of Bottles: 5	Preservative: ICE	Enter Number of Bottles Sent to Lab	5
	CHLSUITE-W					
Group: A	Bottle Type:	P-120ML-WC-THI	# of Bottles: 5	Preservative: ICE	Enter Number of Bottles Sent to Lab	0 (to overflow lab)
	NED-COL-EN					
Group: A	Bottle Type:	P-500ML	# of Bottles: 5	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab	5
	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	5
	W-PO4-F					
Group: B	Bottle Type:	QPCR-P-250ML	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
	PCR-FILTER					
Group: B	Bottle Type:	BG-1L	# of Bottles: 1	Preservative: ICE	Enter Number of Bottles Sent to Lab	1
	W-AHERB-AA W-SUC-AA-R W-UHERB-AA					

LSJR DowntownSalt

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NE-DIST

Requester: Jeremy M. ParrishField Report Prepared By: Alicia Hague

Project ID: SMP

Collected By: Amy Kaltbacher, Brian Davis, Alicia Hague Sampling Agency: _____

 FIELD BLANK 10112017		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>10-11-2017</u> Time <u>0855</u>		☒ Eastern ☐ Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2) <u>A</u>	
		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)			
Temp (C)		pH		Sample Depth		☐ ft ☐ m		Sp. Conductance (umho/cm)			
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt)		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)		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)		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)		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)		Comments					

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By: <u>Q.2</u>	Date/Time <u>10/12/17 10:00</u>
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Group: A	Bottle Type:	P-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	5
	ALKALINITY TURBIDITY W-F W-SO4-IC W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	5
	CHLSUITE-W						
Group: A	Bottle Type:	P-120ML-WC-THI	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	5
	NED-COL-EN						
Group: A	Bottle Type:	P-500ML	# of Bottles: 5	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	5
	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	5
	W-PO4-F						
Group: B	Bottle Type:	QPCR-P-250ML	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	PCR-FILTER						
Group: B	Bottle Type:	BG-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	W-AHERB-AA W-SUC-AA-R W-UHERB-AA						

Date of Request: 25-AUG-2017
 Created By: PARRISH_J On: 25-AUG-2017
 Modified By: SWANSON_C On: 07-SEP-2017
 Customer: NE-DIST
 Project: SMP
 Division:
 District: Northeast District
 Sampling Event: LSJR DowntownSalt

Send Coolers To:

Phone: 904-256-1700
 8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

Send Final Report To:

8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

Program Module Number:
 Priority: 3
 Event Status: S
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 06-SEP-2017
 Biology Request Reviewed By: SWANSON_C On: 07-SEP-2017
 Sampling Kit Required: YES Ship on: 25-SEP-2017
 Sampling Kit Shipped: YES On: 25-SEP-2017
 Sampling Kit Packed By: GREENWOO_J
 Preservatives Needed: NO
 Date to Receive Samples: 09-OCT-2017
 Received By:

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

Comments:

Bottle Group A (Water) With 5 Samples:

Bottle Type: P-1L	Number of Bottles: 5	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-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO4-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: BP-1L	Number of Bottles: 5	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type:	Number of Bottles: 5	Preserved With: ICE
NED-COL-EN	Template: DEFAULT	(ASTM D6503-99) Enterococci by MPN by ALS Environmental Overflow Laboratory for NED
Bottle Type: P-500ML	Number of Bottles: 5	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 Type: P-125ML	Number of Bottles: 5	Preserved With: FILTER-ICE
W-PO ₄ -F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Bottle Group B (Water) With 1 Samples:

Bottle Type: QPCR-P-250ML	Number of Bottles: 2	Preserved With: ICE
PCR-FILTER	Template: DEFAULT	(SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis
Bottle Type: BG-1L	Number of Bottles: 1	Preserved With: ICE
W-AHERB-AA	Template: DEFAULT	(USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS
W-SUC-AA-R	Template: DEFAULT	(EPA 8321B) Analysis of sucralose in water matrices by HPLC/MS/MS
W-UHERB-AA	Template: DEFAULT	(USGS O-2060-01) Urea herbicides and other chemicals in water matrices by HPLC/MS/MS

Log-in Checklist

RQ- 2017-10-09-08

Shipping Method: Fed Ex

Date/Time of Receipt: 10/12/17 10:20

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	2.3°C	11		☒			
BLUE	1.4°C	12		☒			

*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			W-CT-CI-R		

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: JD

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

Coolers Unpacked/Checked by: JD Date: 10/12/17 NCRs (Y/N)? ☐

Event ID: ME-DIST-2017-10-12-01 NCR # ☐

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:

FedEx
Express

Package
US Airbill

FedEx
Tracking
Number

8115 9551 7274

Form
ID No.

0215

Recipient's Copy

1 From

Date 10/11/2017

Sender's Name B DAVIS

Phone 904 256-1700

Company

FDEP / NE ROC

Address

8800 Baymeadows Way W STE 100

Dept./Floor/Suite/Room

City

Jacksonville

State

FL

ZIP

32256

2 Your Internal Billing Reference

3 To

Recipient's Name

SAMPLE RECEIVING

Phone 850 245-8085

Company

FLORIDA DEP/ CHEMISTRY SECTION

Address

2500 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

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.



8115 9551 7274

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.

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 _____ 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.

Obtain recip.
Acct. No. ☐

☐ Sender
Acct. No. in Section
1 will be billed.

☒ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

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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01000

FedEx
Express

 Package
US Airbill

 FedEx
Tracking
Number

8115 9551 7285

1 From

Date 10/11/2017

Sender's Name B. Davis

Phone 904 256-1700

Company

FDEP / NE ROC

Address

8800 Baymeadows Way W STE 100

Dept./Floor/Suite/Room

City

Jacksonville

State

FL

ZIP

32256

2 Your Internal Billing Reference

3 To

Recipient's Name

SAMPLE RECEIVING

Phone 850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 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

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.


8115 9551 7285

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.

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 _____ x _____ kg

☐ Cargo Aircraft Only

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

7 Payment Bill to:

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

Obtain recip.
Acct. No. ☐
☐ Sender
Acct. No. in Section
1 will be billed.

☒ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

2

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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