Log-in Checklist

RQ-2017-12-04-33

Shipping Method: FedEx

Date/Time of Receipt: 12-6-17 / 1025

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	3.2	6		✓			

*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: SR

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes____ No____ NA ✓ Init: SR

Coolers Unpacked/Checked by: SR **Date:** 12-6-17 **NCRs (Y/N)?** N

Event ID: WQAP-2017-12-06-01 **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:

Request Number: RQ-2017-12-04-33

SMP: Alligator, Woodmere, Gottfried

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Project ID: SMP

Requester: Maryann Dugan

Collected By: Maryann Dugan

Field Report Prepared By: Gary Sharek

Sampling Agency: FLDEP SROC

Location: RQ-2017-12-04-33 12/5/2017	Field ID: WBID 2030	STORET #: Alligator Creek @ Small Stream Inflow	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 12/5/17 Time 1015	Eastern / Central	Composite end Date / Time	Matrix (type, e.g., Salt, Fresh, etc): ~~Salt~~ Fresh	Diss. Oxygen 66.3 ☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L)	Temp (C) 22.8	pH 7.3	Sample Depth 0.1 ☐ ft ☒ m	Sp. Conductance (umho/cm) 1191	Salinity (ppt)	Comments	Bottle Group(s) (See pg 2): A
Latitude: 27.057164 ☒ dd ☐ dms	Longitude: -82.401078 ☒ dd ☐ dms														
Location: RQ-2017-12-04-33 12/5/2017	Field ID: WBID 2042	STORET #: Woodmere Canal at Heron Road	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 12/5/17 Time 1043	Eastern / Central	Composite end Date / Time	Matrix (type, e.g., Salt, Fresh, etc): Fresh	Diss. Oxygen 77.3 ☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L)	Temp (C) 23.0	pH 7.3	Sample Depth 0.1 ☐ ft ☒ m	Sp. Conductance (umho/cm) 1218	Salinity (ppt)	Comments	Bottle Group(s): A
Latitude: 27.035501 ☒ dd ☐ dms	Longitude: -82.414583 ☒ dd ☐ dms														
Location: RQ-2017-12-04-33 12/5/2017	Field ID: WBID 2049	STORET #: Gottfried Creek @ Deer Creek Mobile Home Park	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 12/5/17 Time 1112	~~Eastern~~ / Central	Composite end Date / Time	Matrix (type, e.g., Salt, Fresh, etc): Salt	Diss. Oxygen 67.5 ☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L)	Temp (C) 24.3	pH 7.3	Sample Depth 0.2 ☐ ft ☒ m	Sp. Conductance (umho/cm) 39566	Salinity (ppt)	Comments	Bottle Group(s): A
Latitude: 26.946793 ☒ dd ☐ dms	Longitude: -82.346531 ☒ dd ☐ dms														
Location	Field ID	STORET #	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern / Central	Composite end Date / Time	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)	Salinity (ppt)	Comments	Bottle Group(s)
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms														

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
JOHN BARRINGTON	12/5/17 1330	FEDEX	1	SR	12-6-17 10:15

Group: A	Bottle Type: PCR-FILTER	QPCR-P-250ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: SD-SND-ENT	P-120ML-WC-THI	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	0
Group: A	Bottle Type: W-AHERB-AA W-SUC-AA-R W-UHERB-AA	BG-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2

RQ-2017-12-04-33

Date of Request: 26-OCT-2017
Created By: DUGAN_M On: 26-OCT-2017
Modified By: WALTERS_J On: 13-NOV-2017
Customer: WQAP
Project: SMP
Division: Division of Environmental Assessment and Restoration
District: SROC
Sampling Event: SMP: Alligator, Woodmere, Gottfried

Send Coolers To:

Phone: 239-344-5610
2295 Victoria Ave.
Suite 364
Fort Myers, FL 33901
Attn: Maryann Dugan

Send Final Report To:

2295 Victoria Ave.
Suite 364
Fort Myers, FL 33901
Attn: Maryann Dugan

Program Module Number:
Priority: 3
Event Status: S
Criminal Investigation: NO
Chemistry Request Reviewed By: WATTS_J On: 13-NOV-2017
Biology Request Reviewed By: WALTERS_J On: 13-NOV-2017
Sampling Kit Required: YES Ship on: 21-NOV-2017
Sampling Kit Shipped: YES On: 21-NOV-2017
Sampling Kit Packed By: REYNOLDS_T
Preservatives Needed: NO
Date to Receive Samples: 04-DEC-2017
Received By:

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

Comments: Entero, MT

Bottle Group A (Water) With 2 Samples:

Bottle Type: QPCR-P-250ML Number of Bottles: 4 Preserved With: ICE
PCR-FILTER Template: DEFAULT (SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis
Bottle Type: Number of Bottles: 2 Preserved With: ICE
SD-SND-ENT Template: DEFAULT (Enterolert/QT) Enterococci by MPN method by Sanders Laboratories Overflow Laboratory for SD
Bottle Type: BG-1L Number of Bottles: 2 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

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

30203

31000

FedEx Express Package US Airbill

FedEx Tracking Number 8041 3592 5573

Form ID No. 0215

Recipient's Copy

1 From

Date 12/5/17

Sender's Name JOHN BARRINGTON Phone

Company FL DEP SOUTHWEST - FT MYERS

Address 2600 BLAIRSTONE RD

Dept./Floor/Suite/Room

City TALLAHASSEE State FL ZIP 32399

2 Your Internal Billing Reference

3 To

Recipient's Name CHEMISTRY RECEIVING Phone 850 245-8095

Company DEPT ENVIRONMENTAL PROTECTION

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 32399-6542

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.

0110546180

8041 3592 5573

4 Express Package Service * To most locations.

NOTE: Service order has changed. Please select carefully.

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.
- [X] 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
- [X] Other

6 Special Handling and Delivery Signature Options

- [ ] 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. ***Fee applies.***
- [ ] Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. ***Fee applies.***

Does this shipment contain dangerous goods?

One box must be checked.

- [X] No
- [ ] Yes — As per attached Shipper's Declaration.
- [ ] Yes — Shipper's Declaration not required.
- [ ] Dry Ice — Dry Ice, 9, UN 1845 ____ x ____ kg

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging or placed in a FedEx Express Drop Box.

- [ ] 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.
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

[redacted]368

Total Packages ____ Total Weight ____ 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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