A-KIT

PAGE 1 OF ____

Data Qualified? Yes / No

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

STORET Station Name: SKINNER LAKE **Date:** 3-1-17 (mm/dd/yyyy)

STORET Station ID: G5SW0043 **WBID:** 1361A **Latitude:** 28°39'26.05"N (Decimal Degrees)

County: HERNANDO **RQ -** 2017-02-27-22 **ORG ID:** 21FLTPA **Longitude:** 82°27'56.35"W (Decimal Degrees)

Receiving Body of Water: — **Field ID:** G5SW0043

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
JUDY ASHTON	X		X		
LAURIE BACHLER		X		X	X

Sampling Equipment

- [x] Sample Container
- [ ] Van Dorn
- [ ] Pole
- [ ] Carboy
- [ ] Syringe
- [ ] Dipper
- [ ] Other ____

Equipment ID ____

Collection Method

- [ ] Wading
- [ ] From Shore
- [ ] Other (note below)

Via Boat
- [x] Canoe/Kayak
- [x] Electric Motor
- [ ] Gasoline Motor

Water Level: Dry / Pooled / Low / (Normal) / High / Flooded

Matrix: (Fresh) / Marine / DI

Meter ID# YSI JON **Photos:** Yes / (No)

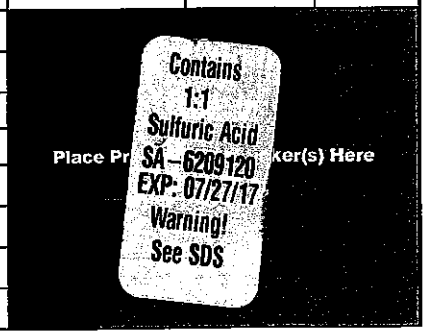
Tide Falling: Yes / No / (NA)

Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (µmhos/cm)	Temp. (C°)
(EST)	1010	0.3	2.5	11.6	134	9.1	0.06	2.1	121	22.7
CEN		2.0		5.1	57	7.6	0.06	LIMITED BY VEG.	134	20.5

Biological Samples Collected: (None) HA SCI RPS Algae ID LVS LVI Other ____

SBIO ID Numbers: SBIO-ID: RPS-ID: Macrophyte-ID: LIMS#:

Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	[x] W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	[x] Ice [x] H_2SO_4			[x] <2
Metals	[ ] W-ICPMS [ ] W-ICP	[ ] Ice [ ] HNO_3			[ ] <2
Filtered Nutrients	[x] W-PO4-F [ ] Field Filtered 0.45 µm Filter	[x] Ice			
Chlorophyll	[x] CHLSUITE-W	[x] Ice			
Physical/Aggregate (Fresh)	[x] Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	[x] Ice			
Physical/Aggregate (Marine)	[ ] Alkalinity / W-F / W-TSS / TURBIDITY	[ ] Ice			
Macroinvertebrates	[ ] MI-FW-QLDC	[ ] Formalin			
Periphyton	[ ] ALGAE-ID	[ ] Ice			
Microbiology	[ ] E Coli [ ] F Coli [ ] Entero [ ] PCR-FILTER	[ ] Ice			
Tracers	[ ] W-SUC-AA-R [ ] W-UHERB-AA	[ ] Ice			
Pesticides	[ ] W-PSNP-TQ [ ] W-AHERB-AA [ ] W-PYR-AA-R [ ] W-PCL-SQ-R [ ] W-UHERB-AA [ ] W-GLYPH	[ ] Ice [ ] Other			
Flow	"J" Qualify Flow				



Notes:

RQ-2017-02-27-22
Date: 03/01/17
Time:
SKINNER

G5SW0043
STORET Field ID
G5SW0043

Signature: [signature] **Date:** 3-1-17

Field Parameters Entered into LIMS: SM 03/13/2017 (Initials/Date)

Field Parameters QC in LIMS: LB 3/28/17 SM 04/10/2017 (Initials/Date)

Date Migrated to STORET: ____ (Initials/Date)

Field Sheets Scanned/Saved: ____ (Initials/Date)

Request Number: RQ-2017-02-27-22

SMP RUN 15

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Collected By: Judy Ashton, Jamie Skinner

Sampling Agency: FDEP

Location

RQ-2017-02-27-22
Date: 03/01/17
Time:
SKINNER

G5SW0043
STORET Field ID
G5SW0043

☐ dms

☐ Comp ☒ Grab	Collection (comp begin or grab) Date 3-1-17 Time 1010	Eastern Central	Composite end Date	Time	Bottle Group(s) (See pg 2)		
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 11.6	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
Temp (C) 22.7	pH 9.1	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 121			
☐ dd ☐ dms	Salinity (ppt) 0.06	Comments					

Location

RQ-2017-02-27-22
Date: 03/01/17
Time:
TOOKE

G5SW0121
STORET Field ID
G5SW0121

☐ Comp ☒ Grab	Collection (comp begin or grab) Date 3-1-17 Time 1110	Eastern Central	Composite end Date	Time	Bottle Group(s)		
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 8.7	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
Temp (C) 24.6	pH 7.8	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 58			
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.03	Comments				

Location

RQ-2017-02-27-22
Date: 03/01/17
Time:
NEFF

G5SW0087
STORET Field ID
G5SW0087

☐ Comp ☒ Grab	Collection (comp begin or grab) Date 3-1-17 Time 1220	Eastern Central	Composite end Date	Time	Bottle Group(s)		
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 7.5	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
Temp (C) 24.7	pH 6.7	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 84			
Latitude ☐ dd ☐ dms		Salinity (ppt) 0.04	Comments				

Location

RQ-2017-02-27-22
Date: 03/01/17
Time:
IOLA-WEST

G5SW0018
STORET Field ID
G5SW0018

☐ Comp ☒ Grab	Collection (comp begin or grab) Date 3-1-17 Time 1310	Eastern Central	Composite end Date	Time	Bottle Group(s)		
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 9.9	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
Temp (C) 23.3	pH 7.4	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 144			
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.07	Comments				

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
Judy Ashton	3-1-17 1700	FES	1		

Group:	Bottle Type:	# of Bottles:	Preservative:	Enter Number of Bottles Sent to Lab
A	P-1L	4	ICE	4

ALKALINITY
TURBIDITY
W-CL-IC
W-COLOR
W-F
W-SO4-IC
W-TDS
W-TSS

Group:	Bottle Type:	# of Bottles:	Preservative:	Enter Number of Bottles Sent to Lab
A	BP-1L	4	ICE	4

CHLSUITE-W

Group:	Bottle Type:	# of Bottles:	Preservative:	Enter Number of Bottles Sent to Lab
A	P-500ML	4	ICE And H2SO4	4

W-NH3
W-NO2NO3
W-S-A-TP
W-TKN
W-TOC

Group:	Bottle Type:	# of Bottles:	Preservative:	Enter Number of Bottles Sent to Lab
A	P-125ML	4	ICE-FLTR	4

W-PO4-F

MURO

FedEx Express® Package US Airbill

FedEx Tracking Number 8104 1402 5574

Form ID No. 0215

1 From *Please print and press hard.*

Date 3-7-17 Sender's FedEx Account Number 4490-2262-9

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

Company

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

City TEMPLE TERRACE State FL ZIP 33637

2 Your Internal Billing Reference
First 24 characters will appear on invoice.

3 To

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

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD Dept/Floor/Suite/Room
We cannot deliver to P.O. boxes or P.O. ZIP codes.

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. ☐

0124452251

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

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.

☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

FedEx Acct. No. / Credit Card No. 4490-2262-9 Exp. Date

Total Packages 1 Total Weight 50 lbs. Total Declared Value† $ ____ .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 service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

611