



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

A-KIT

PAGE 1 OF 1

Data Qualified?

Yes No

STORET Station Name: Tooke Lake

Date: 5-3-17

STORET Station ID: G5SW0121

WBID: 1382C

Latitude: 28°34'8"N

County: Hernando RQ - 2017

ORG ID: 21FLTPA

Longitude: 82°38'10"W

Receiving Body of Water:

Field ID: G5SW0121

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment		
<u>Judy Ashton</u> <u>Laura de Baatman</u>					☒	☒	☒	☒	☒	☒ 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	/	Pooled	/	Low	/	Normal	/	High	/	Flooded	Matrix:	Fresh	/	Marine	/	DI				
Meter ID#	<u>LIL JON</u>											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	1130	0.3	0.5	8.1	105	8.1	0.04	0.5	78	29.0											
CEN								"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	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H2SO4			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO2			☐ <2
Filtered Nutrients	☒ W-PO4-F ☐ Field Filtered 0.45 um Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CHC / W-COLOR / W-SO4-IC / W-TDS	☒ 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 ☐ Enterococcus ☐ 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: QALB 5-25-17
WATER LEVEL VERY LOW

RQ-2017-05-01-36
Date: 05-03-2017
Time:

G5SW0121
Field ID
STORET
↑
G5SW0121

Signature: Judy S

Date: 5-3-17

Field Parameters Entered into LIMS: LB 5-8-17

Field Parameters QC in LIMS: SM 0512312017

Date Migrated to STORET: 6/12/17 MB 121648

Field Sheets Scanned/Saved: SM 06/21/2017

(Initials/Date)

(Initials/Date)

(Initials/Date)

(Initials/Date)

Florida Department of Environmental Protection
Central Laboratory Submittal Form

RUN 5

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: J. Ashton

Project ID: SMP

Collected By: J. Ashton, L. BaetjerSampling Agency: FACP

Location RQ-2017-05-01-36 Date: 05-03-2017 Time: Skinner		Field ID G5SW0043 Field ID STORET G5SW0043		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 5-3-17 Time 1010	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s) (See pg 2)	
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 9.6		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A	
Temp (C) 26.4		pH 9.2		Sample Depth 0.3		Sp. Conductance (umho/cm) 95			
Salinity (ppt) 0.04		Comments							
Latitude ☐ dms		☐ dd ☐ dms							
Location RQ-2017-05-01-36 Date: 05-03-2017 Time: Tookie		Field ID G5SW0121 Field ID STORET G5SW0121		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 5-3-17 Time 1130	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)	
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 8.1		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A	
Temp (C) 29.0		pH 8.1		Sample Depth 0.3		Sp. Conductance (umho/cm) 78			
Salinity (ppt) 0.04		Comments							
Latitude ☐ dms		☐ dd ☐ dms							
Location RQ-2017-05-01-36 Date: 05-03-2017 Time: Neff		Field ID G4SW0087 Field ID STORET G4SW0087		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 5-3-17 Time 1230	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)	
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 11.0		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A	
Temp (C) 30.3		pH 8.2		Sample Depth 0.3		Sp. Conductance (umho/cm) 111			
Salinity (ppt) 0.05		Comments Very low water level							
Latitude ☐ dms		☐ dd ☐ dms							
Location RQ-2017-05-01-36 Date: 05-03-2017 Time: Lola-West		Field ID G5SW0018 Field ID STORET G5SW0018		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 5-3-17 Time 1320	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)	
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 9.8		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A	
Temp (C) 28.1		pH 8.0		Sample Depth 0.3		Sp. Conductance (umho/cm) 153			
Salinity (ppt) 0.07		Comments							
Latitude ☐ dms		☐ dd ☐ dms							

Relinquished By: <u>J. Ashton</u>	Date/Time 5-3-17 1700	Shipping Method <u>FACP</u>	Number of Coolers Shipped: 1	Received By:	Date/Time
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Group: A	Bottle Type: P-1L	# of Bottles: 4	Preservative: ICE	Enter Number of Bottles Sent to Lab	4
ALKALINITY					
TURBIDITY					
W-CL-IC					
W-COLOR					
W-F					
W-SO4-IC					
W-TDS					
W-TSS					
Group: A	Bottle Type: BP-1L	# of Bottles: 4	Preservative: ICE	Enter Number of Bottles Sent to Lab	4
CHLSUITE-W					
Group: A	Bottle Type: P-500ML	# of Bottles: 4	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab	4
W-NH3					
W-NO2NO3					
W-S-A-TP					
W-TKN					
W-TOC					
Group: A	Bottle Type: P-125ML	# of Bottles: 4	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	4
W-PO4-F					

From Please print and press hard.

Date 5-3-17

Sender's FedEx
Account Number

SENDER'S FedEx ACCOUNT NO.

Sender's
Name

Phone (813) 470-5170

Company

FLAPA-SW RDC

Address

13057 N Tellico Pkwy

Dept./Floor/Suite/Room

City

Tennas Tellico

State

NC

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

2600 BLAIRSTONE RD

We cannot deliver to P.O. boxes or P.D. 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

0126430468

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.

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, 6, 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.

4470-2262-9

Exp.
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.

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