DUP & BLANK

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

PAGE ____ OF ____

Data Qualified? Yes / No

STORET Station Name: Lake Iola **Date:** 8-1-17 (mm/dd/yyyy)

STORET Station ID: G5SW0018 **WBID:** 1392A **Latitude:** 28° 23' 41.9"N (Decimal Degrees)

County: Pasco **RQ -** 2017-07-31-23 **ORG ID:** 21FLTPA **Longitude:** 82° 17' 57.4"W (Decimal Degrees)

Receiving Body of Water: _____ **Field ID:** G5SW0018

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Duplicate Collection	Blank Collection
Judy Ashton		X		X			
Laurie Bachler	X		X				

Sampling Equipment

☒ Sample Container ☐ Van Dorn ☐ Pole
☐ Carboy ☐ Syringe
☐ Dipper ☐ Other _____
Equipment ID _____

Collection Method

☐ Wading
☐ From Shore
☐ Other (note below)

Via Boat
☒ Canoe/Kayak
☐ Electric Motor
☐ Gasoline Motor

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

Matrix: (Fresh) / Marine / DI

Meter ID# Weeze **Photos:** Yes / (No)

Tide Falling: Yes / No / (NA)

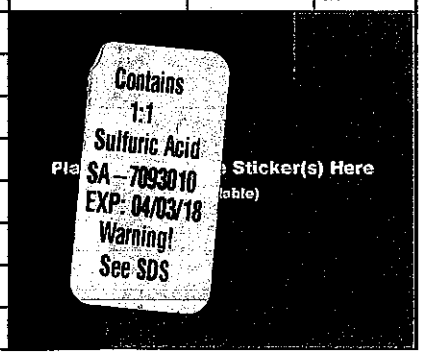
Field Sample

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)	1255	0.3	4.0	~~7.1~~ 7.2J	96J	~~6.9~~ 7.0	0.07	2.5	~~149~~ 150	~~29.8~~ 31.4
CEN		3.5		7.3J	96J	6.9	0.07		149	29.8

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 ☒ H_2SO_4	SA-7093010	04/03/18	☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO_3			☐ <2
Filtered Nutrients	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / 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 ☐ 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 _____			



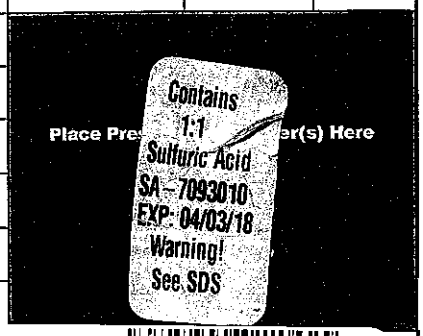
QA/QC Sample Information

Duplicate

Time Zone: (EST) CEN Sample Depth (m): 8.3 Field ID: _____

Time: 1300 Total Depth (m): 4.0

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 ☒ H_2SO_4	SA-7093010	04/03/18	☒ < 2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO_3			☐ < 2
Filtered Nutrients	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☒ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☒ 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				



RQ-2017-07-31-23
Date: 08/01/17
Time:
Iola West
Duplicate

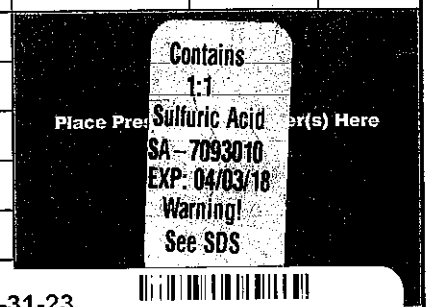
G5SW0018
STORET Field ID

Blank

Time Zone: (EST) CEN Time: 1400 Field ID: BLANK Location: Lake Iola

☒ Field Blank ☐ Equipment Blank ☐ Field Cleaned Equipment Blank Equipment ID N/A

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 ☒ H_2SO_4	SA-7093010	04/03/18	☒ < 2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO_3			☐ < 2
Filtered Nutrients	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☒ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☒ Ice			
Microbiology	☐ E Coli ☐ F Coli ☐ Entero ☐ PCR-FILTER	☐ Ice			
Tracers	☐ W-SUC-AA-R ☐ W-UHERB-AA				
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PCL-SQ-R ☐ W-UHERB-AA ☐ W-GLYPH				



RQ-2017-07-31-23
Date: 08/01/17
Time:
FIELD BLANK

BLANK
STORET Field ID

RQ-2017-07-31-23
Date: 08/01/17
Time:
Iola-West

G5SW0018
STORET Field ID

Notes:

Signature: _____ Date: 8-1-17

Field Parameters Entered into LIMS: SM 08/24/2017 (Initials/Date) Field Parameters QC in LIMS: SM 10/17/2017 (Initials/Date)

Date Migrated to STORET: _____ (Initials/Date) Field Sheets Scanned/Saved: SM 10/17/2017 (Initials/Date)

Request Number: RQ-2017-07-31-23

run 5

Florida Department of Environmental Protection
Central Laboratory Submittal Form

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Collected By: J. Ashton

Field Report Prepared By: L. Bachler

Sampling Agency: FDEP

Location

Field ID: RQ-2017-07-31-23 Date: 08/01/17 Time: G5SW0043 (STORET Field ID) G5SW0043

STORET #: Skinner Lake

Latitude: ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-1-17 Time 1000 Eastern Central | Composite end Date Time | Bottle Group(s) (See pg 2): A

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 4.9 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 28.2 | pH 6.9 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 111

☐ dd ☐ dms | Salinity (ppt) 0.05 | Comments

Location

Field ID: RQ-2017-07-31-23 Date: 08/01/17 Time: G5SW0121 (STORET Field ID) G5SW0121

STORET: Tooke Lake

Latitude: ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-1-17 Time 1100 Eastern Central | Composite end Date Time | Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 7.6 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 29.6 | pH 8.2 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 67

☐ dd ☐ dms | Salinity (ppt) 0.03 | Comments

Location

Field ID: RQ-2017-07-31-23 Date: 08/01/17 Time: G4SW0087 (STORET Field ID) G4SW0087

STORET: Neff Lake

Latitude: ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-1-17 Time 1215 Eastern Central | Composite end Date Time | Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 11.5 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 30.2 | pH 8.0 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 96

☐ dd ☐ dms | Salinity (ppt) 0.04 | Comments

Location

Field ID: RQ-2017-07-31-23 Date: 08/01/17 Time: G5SW0018 (STORET Field ID) G5SW0018

STORET: Jolly West

Latitude: ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-1-17 Time 1255 Eastern Central | Composite end Date Time | Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 7.1 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 31.4 | pH 7.0 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 150

☐ dd ☒ dms | Salinity (ppt) 0.07 | Comments

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
L. Bachler	8-1-17 / 1430	Fed Ex	2		

Request Number: 2017-07-31-23

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:

Collected By:

Sampling Agency:

Location

Field ID: RQ-2017-07-31-23 Date: 08/01/17 Time: Iola-West Duplicate

G5SW0018 ↓STORET Field ID ↑

STORET

Latitude ☐ dd ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-1-17 Time 1300 Eastern Central | Composite end Date Time | Bottle Group(s) (See pg 2): A

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

Location

Field ID: RQ-2017-07-31-23 Date: 08/01/17 Time: FIELD BLANK

BLANK ↓STORET Field ID ↑

STORET

Latitude ☐ dd ☒ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date Time Eastern Central | Composite end Date Time | Bottle Group(s): A

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

Location

Field ID

STORET #

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms

☐ Comp ☐ Grab | Collection (comp begin or grab) Date Time Eastern Central | Composite end Date Time | Bottle Group(s)

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

Location

Field ID

STORET #

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms

☐ Comp ☐ Grab | Collection (comp begin or grab) Date Time Eastern Central | Composite end Date Time | Bottle Group(s)

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

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time

Group	Bottle Type		# of Bottles	Preservative		Enter Number of Bottles Sent to Lab
A	P-1L	ALKALINITY TURBIDITY W-CL-IC W-COLOR W-F W-SO4-IC W-TDS W-TSS	1 6	ICE		6
A	BP-1L	CHLSUITE-W	1 6	ICE		6
A	P-500ML	W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC	1 6	ICE And H2SO4		6
A	P-125ML	W-PO4-F	1 6	ICE-FLTR		6

FedEx Express Package US Airbill

FedEx Tracking Number 8115 9551 3110

Form ID No. 0215

From *Please print and press hard.*

Date 8-1-17 Sender's FedEx Account Number

Sender's Name Phone (813) 470-5700

Company FDEP

Address 13051 N Telecom Pkwy 101 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 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

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.

0126912290

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	Total Weight	Total Declared Value†
1	50 lbs.	$ ____ .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

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PULL AND RETAIN THIS COPY BEFORE AFFIXING TO THE PACKAGE. NO POUCH NEEDED.

MUR4

FedEx Express Package US Airbill

FedEx Tracking Number 8115 9551 3121

Form ID No. 0215

From Please print and press hard.

Date 8-1-17 Sender's FedEx Account Number

Sender's Name Phone (813) 470-5700

Company FDEP

Address 13051 N Telecom Pkwy 101 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 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

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.

0126912290

Ship it. Track it. Pay for it. All online.
Go to fedex.com

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

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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	Total Weight	Total Declared Value†
1	50 lbs.	$ ____ .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.

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