



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: Moon Lake

Date: 5-4-17

STORET Station ID: G5SW0100

WBID: 1409C

Latitude: 28°17'17.4"N

County: Pasco RQ - 2017-05-04-2017

ORG ID: 21FLTPA

Longitude: 82°36'40.7"W

Receiving Body of Water:

Field ID: G5SW0100

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment		
Laurie Baehr Sarah Meyer		X	X	X	X	X	☒ 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#	Lil 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	0930	0.3	4.5	9.75	123 J	7.1	0.07	2.0	154	27.6
CEN		4.0		2.8 J	34 J 45 J	6.7	0.07		154	26.1

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-JCP	☐ Ice ☐ HNO2			☐ <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-C-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 ☐ Enter ☐ PCR-FILTER	☐ Ice			
Tracers	☐ W-SUC-AA-R ☐ W-UHERBAA	☐ 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: QA: LB 5-25-17

RQ-2017-05-01-37
Date: 05-04-2017
Time:

Moon Lake

Contains
1:1
Sulfuric Acid
SA-6302030
EXP: 10/28/17
Warning!
See SDS

Field ID
STORET
G5SW0100

Signature: Laurie Baehr

Date: 5-4-17

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

Field Parameters QC in LIMS: SM 05/23/2017

Date Migrated to STORET: MB 6/12/2017 121645 Event: 05-05-01

Field Sheets Scanned/Saved: (Initials/Date)

Florida Department of Environmental Protection
Central Laboratory Submittal Form

2017 SMP Kit Template 1

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: S Meyer

Project ID: SMP

Collected By: Laurie Bachler & Sarah Meyer

Sampling Agency: FIDEP SW ROC

Location	RQ-2017-05-01-37 Date: 05-04-2017 Time:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 05/04/2017 Time 09 30	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s) (See pg 2)
Field ID	G5SW0100	Field ID STORET	Matrix (type, e.g., Salt, <u>Fresh</u> , etc)	Diss. Oxygen 9.7	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A
STORET #	Moon Lake		Temp (C) 27.6	pH 7.1	Sample Depth 0.3	Sp. Conductance (umho/cm) 154	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.07	Comments		
Location	RQ-2017-05-01-37 Date: 05-04-2017 Time:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 05/04/2017 Time 10 25	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)
Field ID	G5SW0104	Field ID STORET	Matrix (type, e.g., Salt, <u>Fresh</u> , etc)	Diss. Oxygen 7.4	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A
STORET #	Pierce		Temp (C) 27.9	pH 6.3	Sample Depth 0.3	Sp. Conductance (umho/cm) 44	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.07	Comments		
Location	RQ-2017-05-01-37 Date: 05-04-2017 Time:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 05/04/2017 Time 11 05	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)
Field ID	G5SW0107	Field ID STORET	Matrix (type, e.g., Salt, <u>Fresh</u> , etc)	Diss. Oxygen 9.1	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A
STORET #	Green		Temp (C) 28.5	pH 6.6	Sample Depth 0.3	Sp. Conductance (umho/cm) 113	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.05	Comments		
Location	RQ-2017-05-01-37 Date: 05-04-2017 Time:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 05/04/2017 Time 12 00	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)
Field ID	G5SW0113	Field ID STORET	Matrix (type, e.g., Salt, <u>Fresh</u> , etc)	Diss. Oxygen 9.0	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A
STORET #	Big Vienna N		Temp (C) 28.7	pH 7.3	Sample Depth 0.3	Sp. Conductance (umho/cm) 203	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.09	Comments		

Relinquished By: Sarah Meyer	Date/Time 05/04/2017 16 30	Shipping Method FedEx	Number of Coolers Shipped: 1	Received By:	Date/Time
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Group: A	Bottle Type:	P-1L	# of Bottles: 5	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: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 5	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: 5	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	4
	W-PO4-F						

From Please print and press hard.

Date 05/04/2017

Sender's FedEx
Account Number

SENDER'S ACCOUNT NUMBER

Sender's
Name

Phone (813) 470-5770

Company

FDEP- SW ROC

Address

13057 N. TELECOM PKWY

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

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

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.

Form
ID No.

0215

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

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