



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: GREEN LAKE Date: 01/31/2017

STORET Station ID: G5SW0107 WBID: 1423B Latitude: 28° 19' 0.38" N

County: PASCO RQ - 2017-01-30-34 ORG ID: 21FLTPA Longitude: -82° 30' 8.96" W

Receiving Body of Water: — Field ID: G5SW0107

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation/Check
J. Askbn			X		X	
S. Clingerman		X		X		X

Sampling Equipment	
☒ 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

Meter ID# L11 JON Photos: Yes / No

Matrix: Fresh / Marine / DI

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	1145	0.3	2.9	5.8	61	5.9	0.05	1.8	104	17.6
CEN		2.4		4.4	45	5.9	0.05		103	16.2

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-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☒ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QIDC	☐ Formalin			
Periphyton	☐ ALGAE-ID	☐ Ice			
Microbiology	☐ E Coli ☐ F Coli ☐ Enteroc ☐ PCR-FILTER	☐ Ice			
Tracers	☐ W-SUC-AA-R ☐ W-UHERB-AA	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R	☐ Ice			
	☐ W-PCL-SQ-R ☐ W-UHERB-AA ☐ W-GLYPH	☐ Other			
Flow	"J" Quality Flow				

Contains
1:1
Sulfuric Acid
SA-6242080
EXP: 08/29/17
Warning!
See SDS

Notes:

RQ-2017-01-30-34

Date: 01/31/2017

Field ID:

G5SW0107

Time:

STORET:

G5SW0107

Signature: [Signature] Date: 01/31/2017

Field Parameters Entered into LIMS: SC 02/01/17 Field Parameters QC in LIMS: SM 02/09/2017 / SC 02/13/2017

Date Migrated to STORET: _____ Field Sheets Scanned/Saved: _____

Request Number: 55

RQ-2017-01-30-34

Florida Department of Environmental Protection Central Laboratory Submittal Form

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last revised Nov 10, 2015

Customer: SW-DIST

Requester: Judy Ashton

Field Report Prepared By:

S. Clingerman

Project ID: SMP

Collected By: S. Clingerman / J. Ashton

Sampling Agency:

SWROC-FDEP 21FLTPA

Location		Collection		Date/Time		Composite		Bottle Group(s)	
PIERCE LAKE		☐ Comp ☒ Grab	Collection: (comp begin or grab)	Date	Time	Eastern Central	Date	Time	A
ID	RQ-2017-01-30-34	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
ORET#	Date: 01/31/2017	Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Time:	Field ID: G5SW0104	16.4		5.7		0.3		39	
STREET:	STREET: G5SW0104	Salinity (ppt)		Comments					
		☐ dd ☐ dms	0.02						
PIERCE LAKE		☐ Comp ☒ Grab	Collection: (comp begin or grab)	Date	Time	Eastern Central	Date	Time	A
ID	RQ-2017-01-30-34	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
ORET#	Date: 01/31/2017	Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Time:	Field ID: G5SW0100	17.7		6.6		0.3		141	
STREET:	STREET: G5SW0100	Salinity (ppt)		Comments					
		☐ dd ☐ dms	0.01						
GREEN LAKE		☐ Comp ☒ Grab	Collection: (comp begin or grab)	Date	Time	Eastern Central	Date	Time	A
ID	RQ-2017-01-30-34	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
ORET#	Date: 01/31/2017	Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Time:	Field ID: G5SW0107	17.6		5.9		0.3		104	
STREET:	STREET: G5SW0107	Salinity (ppt)		Comments					
		☐ dd ☐ dms	0.05						
PIERCE LAKE		☐ Comp ☒ Grab	Collection: (comp begin or grab)	Date	Time	Eastern Central	Date	Time	A
ID	RQ-2017-01-30-34	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
ORET#	Date: 01/31/2017	Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Time:	Field ID: G5SW0115	19.1		6.5		0.3		186	
STREET:	STREET: G5SW0115	Salinity (ppt)		Comments					
		☐ dd ☐ dms	0.04						

Relinquished By:	Date/Time	Shipping Method	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
J. Ashton	01/31/2017 1800	FedEx						

Group: A	Bottle Type: P-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	5
ALKALINITY					
TURBIDITY					
W-CL-IC					
W-COLOR					
W-F					
W-SO4-IC					
W-TDS					
W-TSS					
Group: A	Bottle Type: P-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	
BOD-UNIN					
Group: A	Bottle Type: BP-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	5
CHLSUITE-W					
Group: A	Bottle Type: P-500ML	# of Bottles: 6	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab	5
W-NH3					
W-NO2NO3					
W-S-A-TP					
W-TKN					
W-TOC					
Group: A	Bottle Type: P-125ML	# of Bottles: 6	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	5
W-PO4-F					



Package
US Airbill

FedEx
Tracking
Number

8104 1402 4773

From Please print and press hard.

Date 01/31/17

Sender's FedEx
Account Number

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

Your Internal Billing Reference

First 24 characters will appear on invoices.

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

0124452251

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.

2nd Business Day

☐ 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

☐ Cargo Aircraft Only

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

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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