A-KIT

PAGE 1 OF 1

Data Qualified? Yes / No

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

STORET Station Name: Green Lake N **Date:** 3/29/17 (mm/dd/yyyy)

STORET Station ID: G5SW0107 **WBID:** 1423B **Latitude:** 28°19'0.38"N (Decimal Degrees)

County: Pasco **RQ -** 2017-03-27-16 **ORG ID:** 21FLTPA **Longitude:** 82°30'13.63"W (Decimal Degrees)

Receiving Body of Water: — **Field ID:** G5SW0107

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Judy Ashton		X		X	X
Dalnick Battizer	X		X		

Sampling Equipment

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

Equipment ID

Collection Method

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

Via Boat
- [X] Canoe/Kayak
- [ ] Electric Motor
- [X] 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	1054	0.3	2.2	40.0 (D) 8.1	98 95 (B)	6.4 6.5	0.05 0.05 (B)	1.6	110 109 (D)	24.2 23.4 (B)
CEN		1.7		40.0 4.0	65	6.4	0.05		110	23.4

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				

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

Place Sticker(s) Here

Notes:

RQ-2017-03-27-16
Date: 03/29/17
Time:
GREEN

G5SW0107
STORET Field ID
G5SW0107

Signature: [signature] **Date:** 3-29-17

Field Parameters Entered into LIMS: LB 4/3/17 (Initials/Date)

Field Parameters QC in LIMS: SM 04/13/2017 (Initials/Date)

Date Migrated to STORET: 6/12/17 MB 121643 (Initials/Date)

Field Sheets Scanned/Saved: SM 06/21/2017 (Initials/Date)

Event: 03-30-04

Request Number: RQ-2017-03-27-16

RUN 6

Florida Department of Environmental Protection
Central Laboratory Submittal Form

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Collected By: Judy Ashton, Laurie Bachler

Sampling Agency: FDEP

Location: MOON

Field ID: RQ-2017-03-27-16 Date: 03/29/17 Time: G5SW0100 (STORET Field ID) G5SW0100

STORET #

Latitude: ☐ dd ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 3-29-17 Time 940 Eastern/Central

Composite end Date Time

Bottle Group(s) (See pg 2): A

Matrix (type, e.g., Salt, Fresh, etc)

Diss. Oxygen 7.4 ☒ mg/L ☐ % sat

Total Res. Chlorine (mg/L)

Temp (C) 23.9

pH 7.4

Sample Depth 0.3 ☐ ft ☒ m

Sp. Conductance (umho/cm) 147

Salinity (ppt) 0.07

Comments

Location: PIERCE

Field ID: RQ-2017-03-27-16 Date: 03/29/17 Time: G5SW0104 (STORET Field ID) G5SW0104

STORET #

Latitude: ☐ dd ☐ dms

☒ Comp ☒ Grab | Collection (comp begin or grab) Date 3-29-17 Time 1025 Eastern/Central

Composite end Date Time

Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc)

Diss. Oxygen 6.4 ☒ mg/L ☐ % sat

Total Res. Chlorine (mg/L)

Temp (C) 23.8

pH 6.8

Sample Depth 0.3 ☐ ft ☒ m

Sp. Conductance (umho/cm) 71

Salinity (ppt) 0.02

Comments

Location: GREEN

Field ID: RQ-2017-03-27-16 Date: 03/29/17 Time: G5SW0107 (STORET Field ID) G5SW0107

STORET #

Latitude: ☐ dd ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 3-29-17 Time 1054 Eastern/Central

Composite end Date Time

Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc)

Diss. Oxygen 8.1 ☒ mg/L ☐ % sat

Total Res. Chlorine (mg/L)

Temp (C) 24.2

pH 6.5

Sample Depth 0.3 ☐ ft ☒ m

Sp. Conductance (umho/cm) 109

Salinity (ppt) 0.05

Comments

Location: VIENNA N.

Field ID: RQ-2017-03-27-16 Date: 03/29/17 Time: G5SW0115 (STORET Field ID) G5SW0115

STORET

Latitude: ☐ dd ☐ dms

☒ Comp ☒ Grab | Collection (comp begin or grab) Date 3-29-17 Time 1155 Eastern/Central

Composite end Date Time

Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc)

Diss. Oxygen 9.3 ☒ mg/L ☐ % sat

Total Res. Chlorine (mg/L)

Temp (C) 25.5

pH 7.7

Sample Depth 0.3 ☐ ft ☒ m

Sp. Conductance (umho/cm) 196

Salinity (ppt) 0.09

Comments

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
Judy Ashton	3-29-17 1700	FED EX	2		

Group: A	Bottle Type:	P-1L	# of Bottles: 5	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:	BP-1L	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	5
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 5	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: 5	Preservative:	ICE-FLTR	**Enter Number of Bottles Sent to Lab**	5
	W-PO4-F						

MUR4

FedEx Express **Package US Airbill**

FedEx Tracking Number **8111 7111 4986**

Form ID No. **0215**

From *Please print and press hard.*

Date 3-29-17 Sender's FedEx Account Number

Sender's Name Phone (813) 470-5700

Company FDEP

Address 3051 Telecom Pkwy N. 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 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.

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. ☐

City TALLAHASSEE State FL ZIP 32399-6542

0125636852

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

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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 **8111 7111 3800**

Form ID No. **0215**

From *Please print and press hard.*

Date 3-29-17 Sender's FedEx Account Number

Sender's Name Phone 813 470-5700

Company FDEP

Address 3051 Telecom Pkwy N. 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 Phone (850) 245-8085

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