



**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: BIG VIENNA

Date: 9-21-17

STORET Station ID: G5SW0113

WBID: 1456B

Latitude: 28°12'26.35"N

County: PASCO RQ: 2017-09-18-31

ORG ID: 21FLTPA

Longitude: 82°28'17.88"W

Receiving Body of Water: _____

Field ID: G5SW0113

Sampling Team Members <u>J. ASHTON</u> <u>C. ORR</u>					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
					☒	☒	☒	☒	☒

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 / <u>High</u> / Flooded					Matrix: <u>Fresh</u> / Marine / DI					
Meter ID# <u>BUSDA</u>		Photos: Yes / <u>No</u>			Tide Falling: Yes / No / <u>NA</u>					
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 CEN	1250	0.3	3.6	6.16	79.4	6.81	0.07	1.1	158	29.22
		3.1		0.20	2.6	6.33	0.07		159	27.00

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	SA-7093010	04/03/18	☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO3			☐ <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-CHIC / 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-JD	☐ 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" Quality Flow				

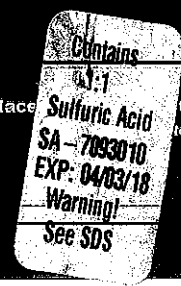
Notes:	RQ-2017-09-18-31	Field ID: <u>G5SW0113</u>
	Date: 09-21-2017	
	Time: _____	
Signature: <u>[Signature]</u>	STORET: <u>G5SW00413</u>	Date: <u>9-21-17</u>

Field Parameters Entered into LIMS: SM 10/05/2017 (Initials/Date)

Date Migrated to STORET: _____ (Initials/Date)

Field Parameters QC in LIMS: _____ (Initials/Date)

Field Sheets Scanned/Saved: SM 10/05/2017 (Initials/Date)



Request Number: RQ-2017-09-18-31

RUN 6

Florida Department of Environmental Protection Central Laboratory Submittal Form

Page 1 of 2

last revised Apr 7, 2016

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: Judy AshtonCollected By: J. Ashton, C. OrrSampling Agency: FDLP

Location		☐ Comp ☒ Grab		Collection (comp begin or grab)		☒ Eastern ☐ Central		Composite end		Bottle Group(s)	
Field ID		Date		Time		Date		Time		Bottle Group(s)	
STORET #		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat		Total Res. Chlorine		A	
Latitude		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)		A	
Big Vienna		29.22		6.81		0.3		158			
Field ID		Salinity (ppt)		Comments							
G5SW0113		0.07									
STORET #		G5SW0013									
Vienna N											
Field ID		Date		Time		☒ Eastern ☐ Central		Composite end		Bottle Group(s)	
STORET #		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat		Total Res. Chlorine		A	
Latitude		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)		A	
G5SW0115		29.54		6.94		0.3		155			
STORET #		Salinity (ppt)		Comments							
G5SW0018		0.07									
Vienna N											
Field ID		Date		Time		☒ Eastern ☐ Central		Composite end		Bottle Group(s)	
STORET #		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat		Total Res. Chlorine		A	
Latitude		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)		A	
G1SW0017		29.3		6.92		0.3		127			
STORET #		Salinity (ppt)		Comments							
G1SW0017		0.06									
Hiawatha											
Field ID		Date		Time		☒ Eastern ☐ Central		Composite end		Bottle Group(s)	
STORET #		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat		Total Res. Chlorine		A	
Latitude		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)		A	
G5SW0107		29.71		6.70		0.3		93			
STORET #		Salinity (ppt)		Comments							
G5SW0107		0.04									
Green											

Relinquished By: <u>J. Ashton</u>	Date/Time: <u>9-21-17 1700</u>	Shipping Method: <u>FRES Ex</u>	Number of Coolers Shipped: <u>1</u>	Received By:	Date/Time:
-----------------------------------	--------------------------------	---------------------------------	-------------------------------------	--------------	------------

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	7
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	16
W-PO4-F					

From Please print and press hard.

Date 9-21-17

**Sender's FedEx
Account Number**

**Sender's
Name**

Phone (813) 470-5700

Company F DEP

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

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

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.

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE

State FL

ZIP 32399-6542

0127681333

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, & 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.

Rev. Date 5/15 • Part #16134 • ©1994-2015 FedEx • PRINTED IN U.S.A. SRM



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

611

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