



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: Cedar Creek

Date: 07/10/2017

(mm/dd/yyyy)

STORET Station ID: G5SW0129

WBID: 1536A

Latitude: 28°07'02.4"N

(Decimal Degrees)

County: Pinellas RQ - 2017-07-10-22

ORG ID: 21FLTPA

Longitude: 82°46'18.5"W

(Decimal Degrees)

Receiving Body of Water:

Field ID: G5SW0129

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Judy Ashton		X	X	X	X	X
Sarah Meyer		X	X	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	

Matrix:	
Fresh / Marine / DI	

Tide Falling:	
Yes / No / NA	

Meter ID#	Photos:
Busta	Yes / No

Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (umhos/cm)	Temp. (C°)
EST	1240	0.1	0.2	7.7	105	7.2	0.25	0.25	533	31.3
CEN										

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 um Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CI-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 ☐ 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			

Contains
1:1
Sulfuric Acid
SA-7093010
EXP: 04/03/18
Warning!
See SDS

Active Sticker(s) Here
(Available)

Flow "J" Qualify Flow

Notes: PCL-FILTER MARKS

RQ-2017-07-10-22
Date: 07-10-2017
Time: Cedar Creek

G5SW0129
Field ID
STORET
G5SW0129

Signature: [Signature] Date: 7-10-17

Field Parameters Entered into LIMS: SM 08/23/2017 (Initials/Date)

Field Parameters QC in LIMS: SM 10/13/2017 (Initials/Date)

Date Migrated to STORET: (Initials/Date)

Field Sheets Scanned/Saved: SM 10/13/2017 (Initials/Date)

Request Number: RQ-2017-07-10-22

Cedar&Stevenson Crk

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

Collected By: J Ashton & S Meyer

Field Report Prepared By: S Meyer

Sampling Agency: FDEP SW ROC

Location RQ-2017-07-10-22 Date: 07-10-2017 Time:	Field ID G5SW0002 STORET ↑ ↓ STORET G5SW0002	☐ Comp ☒ Grab	Collection (comp begin or grab) Date: 07/10/2017 Time: 1005	Eastern Central	Composite end Date Time	Bottle Group(s) (See pg 2)
Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 3.5	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	B		
Temp (C) 29.2	pH 7.0	Sample Depth 0.2	☐ ft ☒ m	Sp. Conductance (umho/cm) 446		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.21	Comments E Coli dropped off @ AEL			
Location RQ-2017-07-10-22 Date: 07-10-2017 Time:	Field ID G5SW0129 STORET ↑ ↓ STORET G5SW0129	☐ Comp ☒ Grab	Collection (comp begin or grab) Date: 07/10/2017 Time: 1246	Eastern Central	Composite end Date Time	Bottle Group(s)
Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 7.7	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A/B/C		
Temp (C) 31.3	pH 7.2	Sample Depth 0.1	☐ ft ☒ m	Sp. Conductance (umho/cm) 533		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.25	Comments E Coli dropped off @ AEL			
Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern Central	Composite end Date Time	Bottle Group(s)	
Field ID	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
STORET #	Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments			
Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern Central	Composite end Date Time	Bottle Group(s)	
Field ID	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
STORET #	Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments			

Relinquished By: Sandra Meyer	Date/Time 07/10/2017 1630	Shipping Method FedEx	Number of Coolers Shipped: 1	Received By:	Date/Time
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Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	ALKALINITY					
	TURBIDITY					
	W-CL-IC					
	W-COLOR					
	W-F					
	W-SO4-IC					
	W-TDS					
	W-TSS					
Group: A	Bottle Type:	BP-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	CHLSUITE-W					
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative: ICE And H2SO4		Enter Number of Bottles Sent to Lab _____
	W-NH3					
	W-NO2NO3					
	W-S-A-TP					
	W-TKN					
	W-TOC					
Group: A	Bottle Type:	P-125ML	# of Bottles: 1	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab _____
	W-PO4-F					
Group: B	Bottle Type:	P-120ML-WC-THI	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	SWD-AEL-EC					
			<i>*Dropped off at AEL</i>			
Group: C	Bottle Type:	QPCR-P-250ML	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	PCR-FILTER					
	PCR-GFD					
	PCR-HF183					
Group: C	Bottle Type:	BG-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	W-AHERB-AA					
	W-SUC-AA-R					
	W-UHERB-AA					

From Please print and press hard.

Date **7-10-17**

Sender's FedEx
Account Number

SENDER'S FedEx ACCOUNT NUMBER

Sender's
Name

Phone **(813) 470-5700**

Company

F DEP

Address

13651 N Telecom Pkwy

Dept./Floor/Suite/Room

101

City **Temple Terrace**

State **FL**

ZIP **33637**

Your Internal Billing Reference

First 24 characters will appear on invoice.

OPTIONAL

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**

0126430465

☐ **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.

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

☐ **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*

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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