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: McKay Creek **Date:** 5-23-17 (mm/dd/yyyy)

STORET Station ID: G5SW0126 **WBID:** 1633B **Latitude:** 27°54'34"N (Decimal Degrees)

County: PINELLAS **RQ -** 2017-05-22-23 **ORG ID:** 21FLTPA **Longitude:** 82°48'58.9"W (Decimal Degrees)

Receiving Body of Water: _____ **Field ID:** G5SW0126

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Judy Ashton	X		X		
Lannie Bartlett		X		X	X

Sampling Equipment

☒ Sample Container ☐ Van Dorn ☐ Pole
☐ Carboy ☐ Syringe
☐ Dipper ☐ Other _____
Equipment ID _____

Collection Method

☒ Wading
☐ From Shore
☐ Other (note below)

Via Boat: ☐ Canoe/Kayak ☐ Electric Motor ☐ Gasoline Motor

Water Level: Dry / Pooled / Low / (Normal) / High / Flooded

Matrix: (Fresh) / Marine / DI

Meter ID# WEEZY **Photos:** Yes / (No)

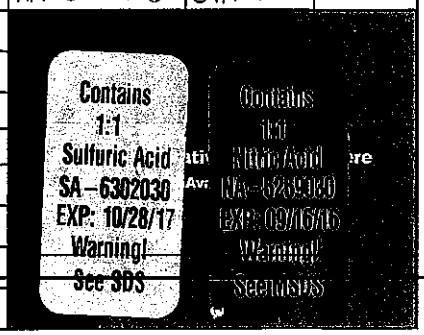
Tide Falling: Yes / (No) / NA

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)	1200	0.3	0.5	4.0	58.0	7.1	20.1	0.5 "S"	32730	31.2
CEN										

Biological Samples Collected: (None) HA SCI RPS Algae ID LVS LVI Other _____

SBIO ID Numbers: SBIO-ID: RPS-ID: Macrophytes: 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 ☒ H_2SO_4	SA-6302030	10/28/17	☒ <2
Metals	☒ W-ICPMS ☐ W-ICP	☒ Ice ☒ HNO_3	NA-5259030	09/16/16	☒ <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-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				



Notes:

PCR-FILTER

Event: 05-24-06

RQ-2017-05-22-23
Date: 05/23/17
Time:
McKay Creek

G5SW0126
STORET Field ID
G5SW0126

Signature: _____ **Date:** 5-23-17

Field Parameters Entered into LIMS: SM 05/25/2017 (Initials/Date) Field Parameters QC in LIMS: LD 6-7-17 SM 07/19/2017 (Initials/Date)

Date Migrated to STORET: MB 9/6/17 12:23:37 (Initials/Date) Field Sheets Scanned/Saved: SM 10/04/2017 (Initials/Date)

Request Number: RQ-2017-05-22-23

C-kit_McKay

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Collected By: J. Ashton, L. Bautler

Field Report Prepared By: Judy Ashton

Sampling Agency: FDEP

Field	Value
Location / Field ID / STORET #	RQ-2017-05-22-23; Date: 05/23/17; Time:; G5SW0126; STORET Field ID; McKay Creek; G5SW0126
Latitude	☐dd ☐dms
Longitude	☐dd ☐dms
Comp / Grab	☐ Comp ☒ Grab
Collection (comp begin or grab)	Date 5-23-17 Time 1200 Eastern
Composite end	Date Time (struck through)
Bottle Group(s) (See pg 2)	A/B
Matrix (type, e.g., Salt, Fresh, etc)	Fresh (circled)
Diss. Oxygen	4.0 ☒ mg/L ☐ % sat
Total Res. Chlorine (mg/L)	(struck through)
Temp (C)	31.2
pH	7.1
Sample Depth	0.3 ☐ ft ☒ m
Sp. Conductance (umho/cm)	32730
Salinity (ppt)	20.1
Comments	E. coli dropped off 2 AEL

Field	Value
Location	
Field ID	
STORET #	
Latitude	☐dd ☐dms
Longitude	☐dd ☐dms
Comp / Grab	☐ Comp ☐ Grab
Collection (comp begin or grab)	Date Time Eastern Central
Composite end	Date Time
Bottle Group(s)	
Matrix (type, e.g., Salt, Fresh, etc)	
Diss. Oxygen	☐ mg/L ☐ % sat
Total Res. Chlorine (mg/L)	
Temp (C)	
pH	
Sample Depth	☐ ft ☐ m
Sp. Conductance (umho/cm)	
Salinity (ppt)	
Comments	

Field	Value
Location	
Field ID	
STORET #	
Latitude	☐dd ☐dms
Longitude	☐dd ☐dms
Comp / Grab	☐ Comp ☐ Grab
Collection (comp begin or grab)	Date Time Eastern Central
Composite end	Date Time
Bottle Group(s)	
Matrix (type, e.g., Salt, Fresh, etc)	
Diss. Oxygen	☐ mg/L ☐ % sat
Total Res. Chlorine (mg/L)	
Temp (C)	
pH	
Sample Depth	☐ ft ☐ m
Sp. Conductance (umho/cm)	
Salinity (ppt)	
Comments	

Field	Value
Location	
Field ID	
STORET #	
Latitude	☐dd ☐dms
Longitude	☐dd ☐dms
Comp / Grab	☐ Comp ☐ Grab
Collection (comp begin or grab)	Date Time Eastern Central
Composite end	Date Time
Bottle Group(s)	
Matrix (type, e.g., Salt, Fresh, etc)	
Diss. Oxygen	☐ mg/L ☐ % sat
Total Res. Chlorine (mg/L)	
Temp (C)	
pH	
Sample Depth	☐ ft ☐ m
Sp. Conductance (umho/cm)	
Salinity (ppt)	
Comments	

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
J. Ashton	5-23-17 1700	Fed Ex	1		

Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	1
	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**	1
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	HNO3	**Enter Number of Bottles Sent to Lab**	1
	W-ICP W-ICPMS						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab**	1
	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**	1
	W-PO4-F						

GROUP B	SWA-AEL-[redacted]EC	1 BOTTLE	ICE	# BOTTLES SENT DROPPED OFF 2 AEL	0
GROUP B	PCR-FILTER	QPCR-P-250MC 2 BOTTLES	ICE	# BOTTLES SENT	2
GROUP B	W-ATHENS-AA W-ATHENS-AA W-SUC-AA-R	BG-1L	ICE	# BOTTLES SENT	1

Advanced
Environmental Laboratories, Inc.
6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
☑ 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589
2105 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620
528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E83076

LAB NUMBER:

Page 1 of 1

CLIENT NAME:	FDEP - SW District	PROJECT NAME:	TMDL / SMP
ADDRESS:	13051 N. Telecom Pkwy	P.O. NUMBER/PROJECT NUMBER:	
	Temple Terrace, FL 33637	PROJECT LOCATION:	Florida
PHONE:	813-470-5700	FAX:	813-470-5996
CONTACT:	Matthew Bearden ~~Sarah Ernst~~	SAMPLED BY:	

TURN AROUND TIME:
☑ STANDARD
☐ RUSH

REMARKS/SPECIAL INSTRUCTIONS:
PO AF315E

Samples are ambient water and not suspected to contain chlorine

WW=waste water SW=surface water GW=ground water DW=drinking water O=oil A=air SO=soil SL=sludge

Field ID	SITE NAME	Grab Comp	SAMPLING DATE	SAMPLING TIME	MATRIX	NO. COUNT	Preserv	Ice, T	BOTTLE SIZE & TYPE: Sterile Plastic Bottle — Fecal Coliforms	E. Coli	Enterococ	LAB NUMBER
RQ-2017-05-22-26 Date: 05-23-2017 Time: Klosterman	G5SW0039 Field ID STORET G5SW0039	Grab	5-23-17	0930	SW	1				1		
RQ-2017-05-22-26 Date: 05-23-2017 Time: PP Ditch #5	G5SW0118 Field ID STORET G5SW0118	Grab	5-23-17	1125	SW	1				1		
RQ-2017-05-22-23 Date: 05/23/17 Time: McKay Creek	G5SW0126 STORET Field ID G5SW0126	Grab	5-23-17 1200	1200	SW	1				1		
		Grab			SW							
		Grab			SW							

I-Ice H=(HCl) S=(H_2SO_4) N=(HNO_3) T=(Sodium Thiosulfate)

Shipment	Method	Sample Kit	Cooler #
Out:	Via:	RB D/T	
Ret:	Via:	AB D/T	
		Trip Bl.	

	Relinquish by:	Date	Time	Received by:	Date	Time
1	[illegible]	5-23-17	1312	[illegible]	5/23/17	1312
2						
3						
4						

Received on Ice ☐ Yes ☐ No QC ☐ sent ☐ received

revised 1/12

MUR4

FedEx Express **Package US Airbill**

FedEx Tracking Number 8113 0563 0215

Form ID No. 0215

From *Please print and press hard.*

Date 5-23-17 Sender's FedEx Account Number

Sender's Name Phone (813) 470-5700

Company FDEP

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 (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

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.

0126430468

Shipping online just got easier. Go to fedex.com/ship

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.
- [X] 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
- [X] 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.

- [X] 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.
- [X] 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.

611

Rev. Date 5/15 • Part #163134 • ©1994–2015 FedEx • PRINTED IN U.S.A. SRM

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