A-KIT

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Data Qualified? Yes / No

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

STORET Station Name: Gilley Creek Date: 8/1/17 (mm/dd/yyyy)

STORET Station ID: G2SW0024 WBID: 1840 Latitude: 27° 30' 48.6" N (Decimal Degrees)

County: Manatee RQ - 2017-07-31-42 ORG ID: 21FLTPA Longitude: 82° 17' 02.7" W (Decimal Degrees)

Receiving Body of Water: _____ Field ID: G2SW0024

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
		X		X	
Dylan Horning	X		X		
M. Sprinkle					

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# 41 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)	1335	~~0.4~~ (HS) 0.3	0.8	7.0	84	6.7	0.1	0.2	94	25.1
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 ☒ H_2SO_4	3093010	4/03/18	☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO_3			☐ <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				

Place Preservative Sticker(s) Here (If Available)

Notes: PCR - Filter

RQ-2017-07-31-42
Date: 07/31/17
Time:
Gilley Creek

G2SW0024
STORET Field ID
G2SW0024

Signature: [signature] Date: 8/1/17

Field Parameters Entered into LIMS: SM 08/24/2017 (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)

Advanced
Environmental Laboratories, Inc.

☐ 6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
☑ 8619 Princess Palm Ave. • Tampa, FL 33819 • 813.630.9616 • Fax 813.630.4327 • E84589
☐ 2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.337.1500 • 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:

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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: 813-470-5995		
CONTACT: Matthews 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
RQ-2017-07-31-41 Date: 07/31/17 Time: Gilley Creek	G2SW0024 ↓STORET Field ID↑ G2SW0024	Grab	8/1/17	1335	SW	1
		Grab			SW	
		Grab			SW	
		Grab			SW	
		Grab			SW	
		Grab			SW	

BOTTLE SIZE & TYPE: Sterile Plastic Bottle

ANALYSIS REQUIRED: Fecal Coliforms — E. Coli

Preserv: Ice, T

LAB NUMBER

	1							

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

Shipment Out: _____ Ret: _____

Method Via: _____ Via: _____

Sample Kit

Cooler # _____

RB _____ D/T _____

AB _____ D/T _____

Trip Bl. _____

	Relinquish by:	Date	Time	Received by:	Date	Time
1	C Orr	8/1/17	1530	[illegible]	8/1/17	1530
2						
3						
4						

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

revised 1/12

Request Number: RQ-2017-07-31-42

Gilley Creek

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Collected By: D. Horning

Field Report Prepared By: C. Orr

Sampling Agency: 8040 FDEP

Location	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 8/1/17 Time 1335 (Eastern) Central	Composite end Date Time	Bottle Group(s) (See pg 2) A, B
Field ID RQ-2017-07-31-41 Date: 07/31/17 G2SW0024	Matrix (type, e.g., Salt, (Fresh), etc) Fresh water	Diss. Oxygen 7.0 84 ☒ mg/L ☒ % sat	Total Res. Chlorine (mg/L) —	
STORET Time: ↓STORET Field ID ↑ Gilley Creek G2SW0024	Temp (C) 25.1	pH 6.7	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 94
Latitude ☐ dd ☐ dms	☐ dd ☐ dms	Salinity (ppt) 0.1	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	

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:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
L. Baehler	8-1-17 1530	FedEx	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:	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	Bottle Type:	QPCR-P-250ML	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab 2
	PCR-FILTER PCR-HF183					
Group: B	Bottle Type:	P-120ML-WC-THI	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab 1
	SWD-AEL-EN					
Group: B	Bottle Type:	BG-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab 1
	W-AHERB-AA W-SUC-AA-R W-UHERB-AA					

MUR 4

FedEx Express — Package US Airbill

FedEx Tracking Number: 8115 9628 1042

Form ID No.: 0215

From *Please print and press hard.*

Date: 8/1/17 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 (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.

0126912290

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

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.

Signature options:

- [ ] 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.
- [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

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