

Central Laboratory Submittal Form

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: *M. Ashton*

Project ID: SMP

Collected By: *Julia Vogel*

Sampling Agency: *Pinellas County*

Location RQ-2017-07-24-21 Date: 07-27-2017 Time: <i>1313</i> Field ID: G5SW0001 STORET # Rattlesnake Creek Latitude dms		☐ Comp ☒ Grab Collection (comp begin or grab) Date <i>7/27/17</i> Time <i>1313</i> Matrix (type, e.g., Salt, <u>Fresh</u> , etc.) <i>17-01</i> <i>water</i> Temp (C) <i>31.29</i> pH <i>7.71</i> Salinity (ppt) <i>0.29</i> Comments: <i>Dropped off E.coli at AEL</i>		☒ Eastern ☐ Central Composite end Date _____ Time _____ Diss. Oxygen <i>7.91</i> ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) _____ Sample Depth <i>0.16</i> ☐ ft ☒ m Sp. Conductance (umho/cm) <i>0.636</i>		Bottle Group(s) (See pg 2) <i>A, B</i>	
Location RQ-2017-07-24-21 Date: 07-27-2017 Time: <i>1341</i> Field ID: G5SW0140 STORET # Rattlesnake Creek Latitude dms		☐ Comp ☒ Grab Collection (comp begin or grab) Date <i>7/27/17</i> Time <i>1341</i> Matrix (type, e.g., Salt, <u>Fresh</u> , etc.) <i>17-03</i> <i>water</i> Temp (C) <i>29.60</i> pH <i>7.17</i> Salinity (ppt) <i>0.33</i> Comments: <i>Dropped off E.coli at AEL</i>		☒ Eastern ☐ Central Composite end Date _____ Time _____ Diss. Oxygen <i>4.12</i> ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) _____ Sample Depth <i>0.29</i> ☐ ft ☒ m Sp. Conductance (umho/cm) <i>0.724</i>		Bottle Group(s) <i>A</i>	
Location RQ-2017-07-24-21 Date: 07-27-2017 Time: <i>1032</i> Field ID: G5SW0132 STORET # Curlew Creek (Fresh) Latitude dms		☐ Comp ☒ Grab Collection (comp begin or grab) Date <i>7/27/17</i> Time <i>1032</i> Matrix (type, e.g., Salt, <u>Fresh</u> , etc.) <i>10-02</i> <i>water</i> Temp (C) <i>28.55</i> pH <i>7.74</i> Salinity (ppt) <i>0.26</i> Comments: <i>Dropped off E.coli at AEL</i>		☒ Eastern ☐ Central Composite end Date _____ Time _____ Diss. Oxygen <i>6.41</i> ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) _____ Sample Depth <i>0.20</i> ☐ ft ☒ m Sp. Conductance (umho/cm) <i>0.570</i>		Bottle Group(s) <i>A, B</i>	
Location RQ-2017-07-24-21 Date: 07-27-2017 Time: <i>1001</i> Field ID: G5SW0133 STORET # Bee Branch Latitude dms		☐ Comp ☒ Grab Collection (comp begin or grab) Date <i>7/27/17</i> Time <i>1001</i> Matrix (type, e.g., Salt, <u>Fresh</u> , etc.) <i>08-03</i> <i>water</i> Temp (C) <i>27.97</i> pH <i>7.63</i> Salinity (ppt) <i>0.35</i> Comments: <i>Dropped off E.coli at AEL</i>		☒ Eastern ☐ Central Composite end Date _____ Time _____ Diss. Oxygen <i>5.11</i> ☒ mg/L ☐ % sat Total Res. Chlorine (mg/L) _____ Sample Depth <i>0.13</i> ☐ ft ☒ m Sp. Conductance (umho/cm) <i>0.765</i>		Bottle Group(s) <i>A, B</i>	

Relinquished By: <i>Julia Vogel</i>	Date/Time <i>7/27/17 1500</i>	Shipping Method <i>to Pinellas Lab</i>	Number of Coolers Shipped: <i>2</i>	Received By: <i>Tyler Reynolds</i>	Date/Time <i>07/28/17 @ 10:05</i>
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Group: A Bottle Type: QPCR-P-250ML # of Bottles: 8 Preservative: ICE Enter Number of Bottles Sent to Lab 8

PCR-HF183 ~~PCR-HF183~~

Group: A Bottle Type: BG-1L # of Bottles: 4 Preservative: ICE Enter Number of Bottles Sent to Lab 4

W-AHERB-AA

W-SUC-AA-R

W-UHERB-AA

Group ~~A~~ B

PCR-FILTER 250ml

of bottles:

6

ICE

bottles sent 6

Group A

SUD-AEL-EC 120ml

of bottles:

4

ICE

bottles sent 2

Dropped off at AEL

Date of Request: 27-JUN-2017
Created By: ASHTON_J On: 27-JUN-2017
Modified By: WATTS_J On: 11-JUL-2017
Customer: WQAP
Project: SMP
Division: Division of Environmental Assessment and Restoration
District:
Sampling Event: Pinellas LR2

Send Coolers To:

Phone: 813-470-5772
13051 N. Telecom Parkway

Tampa, FL 33637
Attn: Judy Ashton

Program Module Number:
Priority: 3
Event Status: S
Criminal Investigation: NO
Chemistry Request Reviewed By: WATTS_J On: 11-JUL-2017
Biology Request Reviewed By: SWANSON_C On: 10-JUL-2017
Sampling Kit Required: YES Ship on: 13-JUL-2017
Sampling Kit Shipped: YES On: 13-JUL-2017
Sampling Kit Packed By: GREENWOO_J
Preservatives Needed: NO
Date to Receive Samples: 27-JUL-2017
Received By:

Send Final Report To:

13051 N. Telecom Parkway

Tampa, FL 33637
Attn: Judy Ashton

Report Type: Final Only
FTP Data: NO
QC Report: YES
Date Log: NO
Authorization Log: NO

Comments: Pinellas County to collect and analyze E.coli

Bottle Group A (Water) With 4 Samples:

Bottle Type: QPCR-P-250ML	Number of Bottles: 8	Preserved With: ICE
PCR-HF183	Template: DEFAULT	(SOP-PCR-1.0) Detection and quantification of human-specific HF183 Bacteroides genetic marker with quantitative polymerase chain reaction
Bottle Type: BG-1L	Number of Bottles: 4	Preserved With: ICE
W-AHERB-AA	Template: DEFAULT	(USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS
W-SUC-AA-R	Template: DEFAULT	(EPA 8321B) Analysis of sucralose in water matrices by HPLC/MS/MS
W-UHERB-AA	Template: DEFAULT	(USGS O-2060-01) Urea herbicides and other chemicals in water matrices by HPLC/MS/MS

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

Log-in Checklist

RQ- 2017-07-24-21

Shipping Method: Fedex

Date/Time of Receipt: 07/28/17 @ 10:05 am

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape		*Intact?		Tracking # (fill out only if waybill copy is damaged)
			Present?		Yes	No	
<u>Red</u>	<u>0.9°C</u>	<u>10</u>		<u>✓</u>			<u>8115 95316576</u>
<u>Red</u>	<u>1.2°C</u>	<u>8</u>		<u>✓</u>			<u>8115 96280274</u>

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

****Note:** If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

**Chain of Custody/ Field Sheet(s) Included? Yes ✓ No

CONTAINER CHECK

**Evidence Tape on Bottles? Yes No ✓ If yes, is it intact? Yes No

**Caps on tight? Yes ✓ No **Containers intact? Yes ✓ No

**Sufficient Sample Volume: Yes ✓ No

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)		<u>✓</u>	W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R			W-CT-CI-R		

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

**Acid Preserved Samples: pH ≤ 2.0? Yes No NA ✓ Init: MR

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes No NA ✓ Init: MR

Coolers Unpacked/Checked by: MR Date: 07/28/17 NCRs (Y/N)? N

Event ID: WQAP-2017-07-28-02 NCR #

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes _____ No ✓

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes _____ No _____

If no, were samples shipped on dry ice? Yes _____ No _____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes _____ No _____

Date and time samples preserved: _____

Additional Comments:

fedex.com 1800.GoFedEx 1800.463.3339

Express **US AIRBILL** Tracking Number **8115 7551 6576**

1 From
Date **7/27/15**
Sender's Name **FLORIDA DEP/** Phone **813 470 5700**
Company **FLORIDA DEP/**
Address **2600 BLAIRSTONE RD**
City **TAMPA** State **FL** ZIP **33637**

2 Your Internal Billing Reference

3 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.
City **TALLAHASSEE** State **FL** ZIP **32399**



8115 9551 6576

Form ID No. **0215**

4 Express Package Service *To most locations. Pack For pack FedEx E

Next Business Day
☐ FedEx First Overnight
☒ FedEx Priority Overnight
☐ FedEx Standard Overnight

2 or 3 Business Days
☐ FedEx 2Day A.M.
☐ FedEx 2Day
☐ FedEx Express Saver

5 Packaging *Declared value limit \$500.
☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube

6 Special Handling and Delivery Signature Options Fees may apply. See

☐ Saturday Delivery
☐ No Signature Required
☐ Direct Signature
☐ Indirect S

Does this shipment contain dangerous goods?
☒ No ☐ Yes ☐ Yes ☐ Dry Ice ☐ Cargo Aircraft

7 Payment Bill to:
Sender ☐ Recipient ☒ Third Party ☐ Credit Card

Total Packages **1** Total Weight **50** lbs.

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01000

FedEx Package **US AIRBILL** Tracking Number **8115 9628 0274**

1 From
Date **7/27/15**
Sender's Name **FLORIDA DEP/** Phone **813 470 5700**
Company **FLORIDA DEP/**
Address **13051 N. Telecom PKWY**
City **TAMPA** State **FL** ZIP **33637**

2 Your Internal Billing Reference

3 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.
City **TALLAHASSEE** State **FL** ZIP **32399**



8115 9628 0274

Form ID No. **0215**

4 Express Package Service *To most locations. Pack For pack FedEx E

Next Business Day
☐ FedEx First Overnight
☒ FedEx Priority Overnight
☐ FedEx Standard Overnight

2 or 3 Business Days
☐ FedEx 2Day A.M.
☐ FedEx 2Day
☐ FedEx Express Saver

5 Packaging *Declared value limit \$500.
☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube

6 Special Handling and Delivery Signature Options Fees may apply. See

☐ Saturday Delivery
☐ No Signature Required
☐ Direct Signature
☐ Indirect S

Does this shipment contain dangerous goods?
☒ No ☐ Yes ☐ Yes ☐ Dry Ice ☐ Cargo Aircraft

7 Payment Bill to:
Sender ☐ Recipient ☒ Third Party ☐ Credit Card

Total Packages **1** Total Weight **50** lbs.

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