

Log-in Checklist

RQ- 2018-01-08-33

Shipping Method: Fed Ex

Date/Time of Receipt: 1/24/18 10:30

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
REO	1.3°C	8		☒			
REO	0.6°C	12		☒			

*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)			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: J.D.

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes ☐ No ☒ NA ☒ Init: J.D.

Coolers Unpacked/Checked by: J.D. Date: 1/24/18

NCRs (Y/N)? ☐

Event ID: ME-DIST-2018-01-26-01

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:

RQ-2018-01-08-33

243

Request Number: RQ-2017-11-06-30

Florida Department of Environmental Protection

Page 1 of 2

LSJR Southside

Pb

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NE-DIST

Requester: Nicole Frederick

Field Report Prepared By:

P. O'Connor

Project ID: SMP

Collected By:

J. Parrish, P.O'Connor

Sampling Agency:

DEAR NED Roc

Location	Field ID: Win ID:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 01-25-18 Time 10:35	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)	
Field ID	G1NE0870		Matrix (type, e.g., Salt, Fresh, etc) Surface Water Fresh		Diss. Oxygen 8.61	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	
STORET #	Galilee Lake center		Temp (C) 13.74	pH 7.9	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 40	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.02	Comments DO% 83.0			A+B
Location	Field BLANK 01-25-18		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 01-25-18 Time 1235	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)	
Field ID			Matrix (type, e.g., Salt, Fresh, etc) DEIONIZED WATER		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			A
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: P.O'Connor	Date/Time 01-25-18 1430	Shipping Method Fed Ex	Number of Coolers Shipped: 2 (Total)	Received By: J.D.	Date/Time 1/26/18 10:30
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* Sample collection time taken from sample container.

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: FILTER-ICE	Enter Number of Bottles Sent to Lab _____
	W-PO4-F			
Group: B	Bottle Type: P-120ML-WC-THI	# of Bottles: 4	Preservative: ICE	Enter Number of Bottles Sent to Lab _____
	NED-AEG-EC			

Central Laboratory Submittal Form

Customer: NE-DIST

Requester: Nicole Frederick

Field Report Prepared By: P. O'Connor

Project ID: SMP

Collected By: J. Parrish, P. O'Connor

Sampling Agency: DEAR NED ROC

Location	Field ID: Win ID:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 01-25-18 Time 1250	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)	
Field ID	G1NE0861		Matrix (type, e.g., Salt, Fresh, etc) Surface Water Fresh		Diss. Oxygen 7.9	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	
STORET	South Bull Pond center		Temp (C) 13.0	pH 5.0	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 57	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.03	Comments DO% 76.0			A+B P
Location	Field ID: Win ID:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 01-25-18 Time 1215	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)	
Field ID	20020053		Matrix (type, e.g., Salt, Fresh, etc) Surface Water Fresh		Diss. Oxygen 9.0	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	
STORET	Cowpen lake center		Temp (C) 14.1	pH 5.8	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 46	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.02	Comments DO% 88.0			A+B P
Location	Field ID: Win ID:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 01-25-18 Time 1115	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)	
Field ID	20020100		Matrix (type, e.g., Salt, Fresh, etc) Surface Water Fresh		Diss. Oxygen 8.35	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	
STORET	Fanny Lake center		Temp (C) 13.9	pH 6.1	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 71	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.04	Comments DO% 81.0			A+B P
Location	Field ID: Win ID:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 01-25-18 Time 1140	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)	
Field ID	G1NE0863		Matrix (type, e.g., Salt, Fresh, etc) Surface Water Fresh		Diss. Oxygen 7.9	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	
STORET	Gillis Lake center		Temp (C) 14.2	pH 5.6	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 64	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.03	Comments DO% 61			A+B P

Relinquished By: P. O'Connor	Date/Time 01-25-18	Shipping Method	Number of Coolers Shipped: 2 total	Received By: J. O.	Date/Time 1/26/18 10:30
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Group: A	Bottle Type:	P-1L	# of Bottles: 15 Po	Preservative:	ICE	Enter Number of Bottles Sent to Lab	10 5
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 15 Po	Preservative:	ICE	Enter Number of Bottles Sent to Lab	10 5
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 15 Po	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	10 5
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 15 Po	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab	10 5
	W-PO4-F						
Group: 1A Po	Bottle Type:	P-120ML-WC-THI	# of Bottles: 15 Po	Preservative:	ICE	Enter Number of Bottles Sent to Lab	5 to ALS JAX
	NED-AEG-EC						



CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

9143 Philips Highway, Suite 200 Jacksonville, FL 32256 / Ph(904) 739-2277 / FAX (904) 739-2011

SR #

ALS Contact: Jerry Allen

Page 1 of 1

[illegible]

Date of Request: 22-DEC-2017
 Created By: PARRISH_J On: 22-DEC-2017
 Modified By: WALTERS_J On: 02-JAN-2018
 Customer: NE-DIST
 Project: SMP
 Division:
 District: Northeast District
 Sampling Event: Interlachen 2

Send Coolers To:

Phone: 904-256-1700
 8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

Send Final Report To:

8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

Program Module Number:
 Priority: 3
 Event Status: S
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 22-DEC-2017
 Biology Request Reviewed By: WALTERS_J On: 02-JAN-2018
 Sampling Kit Required: YES Ship on: 05-JAN-2018
 Sampling Kit Shipped: YES On: 05-JAN-2018
 Sampling Kit Packed By: GREENWOO_J
 Preservatives Needed: NO
 Date to Receive Samples: 08-JAN-2018
 Received By:

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

Comments:**Bottle Group A (Water) With 5 Samples:**

Bottle Type: P-1L	Number of Bottles: 5	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-CL-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Chloride in aqueous matrices
W-COLOR	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
Color (true)		
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO ₄ -IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: BP-1L	Number of Bottles: 5	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type:	Number of Bottles: 5	Preserved With: ICE
NE-ALS-ECQ	Template: DEFAULT	(SM 9223 B) Escherichia coli by Colilert Quanti-Tray method by ALS Environmental Overflow Laboratory for Northeast District
Bottle Type: P-500ML	Number of Bottles: 5	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 5	Preserved With: FILTER-ICE
W-PO ₄ -F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

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

Date of Request: 22-DEC-2017
 Created By: PARRISH_J On: 22-DEC-2017
 Modified By: WALTERS_J On: 02-JAN-2018
 Customer: NE-DIST
 Project: SMP
 Division:
 District: Northeast District
 Sampling Event: Interlachen 2

Send Coolers To:

Phone: 904-256-1700
 8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

Send Final Report To:

8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

Program Module Number:

Priority: 3

Event Status: S

Criminal Investigation: NO

Chemistry Request Reviewed By: WATTS_J On: 22-DEC-2017

Biology Request Reviewed By: WALTERS_J On: 02-JAN-2018

Sampling Kit Required: YES Ship on: 05-JAN-2018

Sampling Kit Shipped: YES On: 05-JAN-2018

Sampling Kit Packed By: GREENWOO_J

Preservatives Needed: NO

Date to Receive Samples: 08-JAN-2018

Received By:

Report Type: Final Only

FTP Data: NO

QC Report: YES

Date Log: NO

Authorization Log: NO

Comments:

Bottle Group A (Water) With 5 Samples:

Bottle Type: P-1L	Number of Bottles: 5	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-CL-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Chloride in aqueous matrices
W-COLOR	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
Color (true)		
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO4-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: BP-1L	Number of Bottles: 5	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type:	Number of Bottles: 5	Preserved With: ICE
NE-ALS-ECQ	Template: DEFAULT	(SM 9223 B) Escherichia coli by Colilert Quanti-Tray method by ALS Environmental Overflow Laboratory for Northeast District
Bottle Type: P-500ML	Number of Bottles: 5	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 5	Preserved With: FILTER-ICE
W-PO ₄ -F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

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

01000

FedEx
ExpressPackage
US AirbillFedEx
Tracking
Number

8119 7780 6829

1 From

Date 01-25-18

Sender's
Name

P. O'Connor

Phone

904 705 7873

Company

DEAR NED ROC

Address

8800 BAYMEADOWS WAY W.

City

JAX

State

FL

ZIP

32256

Dept./Floor/Suite/Room

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.

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

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.

8119 7780 6829

Form
ID No.

0215

Recipient's Copy

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?

☒ No ☐ Yes
One box must be checked.
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.

Obtain recip.
Acct. No. ☐☐ Sender
Acct. No. in Section
1 will be billed.☒ Recipient☐ Third Party☐ Credit Card☐ Cash/Check

Total Packages

Total Weight

142

lbs.

Credit Card Auth.

*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

611

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fedex.com 1800.GoFedEx 1800.463.3339

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FedEx
Express

 Package
US Airbill

 FedEx
Tracking
Number

8119 7781 2136

1 From

Date

01-25-18

Sender's
Name

P.O'Connor

Phone

904 7057873

Company

DEAR NED ROC

Address

8800 BAYMEADOWS WAY W.

City

JAX

State

FL

ZIP

32256

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.

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

 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.
☐

0127857428



8119 7781 2136

Form
ID No.

0215

Recipient's Copy

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, 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.

Obtain recip.

Acct. No.

☐

Sender

Acct. No. in Section

I will be billed.

☒

Recipient

☐

Third Party

☐

Credit Card

☐

Cash/Check

Total Packages

Total Weight

242

lbs.

Credit Card Auth.

*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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