

Log-in Checklist

RQ- 2018-01-15-03

Shipping Method: FedEx

Date/Time of Receipt: 1/25/18 10:05

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	
RED	1.1°C	16		✓			

*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-Cl-R		

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: [Signature]

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes ☐ No ☒ NA ☐ Init: 9.2

Coolers Unpacked/Checked by: Q.2 Date: 1/25/18

NCRs (Y/N)?

Event ID: UEC 1
NE-DIST-2018-01-25-01 (SMP)

NCR #

Date Received: 25-JAN-2018 10:05

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:

UEC 1

Central Laboratory Submittal Form

P. O'Connor last revised Jan 3, 2018

Customer: NE-DIST

Requester: Nicole Frederick

Field Report Prepared By:

Project ID: SMP

Collected By:

Sampling Agency:

WIN ID/
Field ID
Lake Vedra /
Ibis Cove @
Solana Rd



27010180

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

L
F
V
WIN ID/
Field ID:
Ponte Vedra Lk
@ Sawgrass Dr.



27010182

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

WIN/
Field ID:
Palm Coast Canal
@ Old Kings Rd



G5NE0005

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

WIN/
Field ID:
Cracker Branch
@ CR 204



27010060

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>01-24-18</u> Time <u>0820</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Matrix (type, e.g., Salt, Fresh, etc) <u>Surface Water Fresh</u>	Diss. Oxygen <u>10.89</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	<u>A/B</u>
Temp (C) <u>13.6</u>	pH <u>8.25</u>	Sample Depth <u>0.3</u>	Sp. Conductance (umho/cm) <u>898</u>	
Comments <u>DO% 104.7</u>				
☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>01-24-18</u> Time <u>0855</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s)
Matrix (type, e.g., Salt, Fresh, etc) <u>Surface Water Fresh</u>	Diss. Oxygen <u>3.1</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	<u>B</u>
Temp (C) <u>14.2</u>	pH <u>7.18</u>	Sample Depth <u>0.3</u>	Sp. Conductance (umho/cm) <u>770</u>	
Comments <u>DO% 30.3</u>				
☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>01-24-18</u> Time <u>1200</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s)
Matrix (type, e.g., Salt, Fresh, etc) <u>Surface Water Fresh</u>	Diss. Oxygen <u>7.4</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	<u>A/B</u>
Temp (C) <u>15.2</u>	pH <u>7.4</u>	Sample Depth <u>0.3</u>	Sp. Conductance (umho/cm) <u>323</u>	
Comments <u>DO% 74</u>				
☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>01-24-18</u> Time <u>1040</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s)
Matrix (type, e.g., Salt, Fresh, etc) <u>Surface Water Fresh</u>	Diss. Oxygen <u>5.77</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	<u>A/B</u>
Temp (C) <u>15.45</u>	pH <u>7.5</u>	Sample Depth <u>0.3</u>	Sp. Conductance (umho/cm) <u>190</u>	
Comments <u>DO%</u>				

Relinquished By: <u>P. O'Connor</u>	Date/Time <u>01-24-18 1400</u>	Shipping Method <u>Fed Ex</u>	Number of Coolers Shipped: <u>2 (total)</u>	Received By:	Date/Time
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Group: A	Bottle Type:	P-1L	# of Bottles: 4	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: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab
	CHLSUITE-W					
Group: A	Bottle Type:	P-500ML	# of Bottles: 4	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: 4	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab
	W-PO4-F					
Group: B	Bottle Type:	P-250ML-WI-THI	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab
	NE-ALS-ECQ					

UEC 1

last revised Jan 3, 2018

Customer: NE-DIST

Requester: Nicole Frederick

Field Report Prepared By: P. O'Connor

Project ID: SMP

Collected By: B. Davis, P. O'Connor

Sampling Agency: DEAR NED Rec

WIN/
Field ID:

27010050

Moses Creek
@ US 1

☐ Comp ☒ Grab	Collection (comp begin or grab) Date 01-24-18 Time 1000	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Matrix (type, e.g., Salt, Fresh, etc) Surface Water Fresh		Diss. Oxygen 6.1	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____
Temp (C) 14.5	pH 7.7	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 245

A/B

Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.12	Comments D0% 60.0	
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central
Field ID		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____
WIN/STORET #		Temp (C)	pH	Sample Depth ☐ ft ☐ m
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central
Field ID		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____
WIN/STORET #		Temp (C)	pH	Sample Depth ☐ ft ☐ m
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central
Field ID		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____
WIN/STORET #		Temp (C)	pH	Sample Depth ☐ ft ☐ m
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central
Field ID		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____
WIN/STORET #		Temp (C)	pH	Sample Depth ☐ ft ☐ m
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments

Relinquished By: P. O'Connor	Date/Time 01-24-18 1400	Shipping Method Fed Ex	Number of Coolers Shipped: 2 (total)	Received By:	Date/Time
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Group: A	Bottle Type: P-1L	# of Bottles: 5	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: 5	Preservative: ICE	Enter Number of Bottles Sent to Lab
CHLSUITE-W				
Group: A	Bottle Type: P-500ML	# of Bottles: 5	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: 5	Preservative: FILTER-ICE	Enter Number of Bottles Sent to Lab
W-PO4-F				
Group: B	Bottle Type: P-250ML-WI-THI	# of Bottles: 5	Preservative: ICE	Enter Number of Bottles Sent to Lab
NE-ALS-ECQ				

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

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

Page 1 of 1

SR #

ALS Contact: Jerry Allen

[illegible]

Date of Request: 20-DEC-2017
 Created By: FREDERIC_N On: 20-DEC-2017
 Modified By: SWANSON_C On: 09-JAN-2018
 Customer: NE-DIST
 Project: SMP
 Division:
 District: Northeast District
 Sampling Event: UEC 1

Send Coolers To:

Phone: 904-256-1541
 8800 Baymeadows Way W
 Suite 100
 Jacksonville, FL 32256-7577
 Attn: Nicole Frederick

Send Final Report To:

8800 Baymeadows Way W
 Suite 100
 Jacksonville, FL 32256-7577
 Attn: Nicole Frederick

Program Module Number:
 Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 08-JAN-2018
 Biology Request Reviewed By: SWANSON_C On: 09-JAN-2018
 Sampling Kit Required: YES Ship on: 10-JAN-2018
 Sampling Kit Shipped: YES On: 10-JAN-2018
 Sampling Kit Packed By: SHAIK_A
 Preservatives Needed: NO
 Date to Receive Samples: 19-JAN-2018
 Received By: SHAIK_A On: 25-JAN-2018

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

Comments: Group A: Freshwater Kit, No Metals
 Group B: E.coli to AEL-jaxs

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: 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

Bottle Group B (Water) With 5 Samples:

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

00495

01000

FedEx Package
Express US Airbill
FedEx
Tracking
Number

8114 7780 7218

1 From

Date 01-24-18

Sender's
Name

PO'Connor

Phone

904 7057873

Company

DFAR NED ROC

Address

8800 BRYMEADOWS WAY W.

Dept./Floor/Suite/Room

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

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 confirmation of your shipping address.

City

TALLAHASSEE

State

FL

ZIP

32399

0127857428



fedex.com 1800.GoFedEx 1800.463.3339

MUR4

0215

4 Express Package Service

* To most locations.

Packages up to 150 lbs.
For packages over 150 lbs., see the
FedEx Express Freight US Airbill

Next Business Day	2 or 3 Business Days
☐ FedEx First Overnight Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day A.M. Second business morning.* Saturday Delivery NOT available.
☒ FedEx Priority Overnight Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Standard Overnight Next business afternoon.* Saturday Delivery NOT available.	☐ 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
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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.
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Does this shipment contain dangerous goods?

One box must be checked.		Yes Shipper's Declaration not required.		☐ Dry Ice Dry Ice, 6 UN 1845	☐ Cargo Aircraft Only
☒ No	☐ Yes As per attached Shipper's Declaration.	☐ Yes Shipper's Declaration not required.			

 Restrictions apply for dangerous goods — see the current FedEx Service Guide.

7 Payment Bill to:

Sender's Acct. No. to Section 1 of bill	☒ Recipient	☐ Third Party	☐ Credit Card	☐ Cash/Check
Total Packages 1178		Total Weights 55		Credit Card Auth.

 Your liability is limited to US\$500 unless you declare a higher value. See the current FedEx Service Guide for details.

611

fedex.com 1800.GoFedEx 1800.463.3339