



# QA/QC Sample Information Duplicate

Time Zone: EST CEN Time: 1215 Field ID: G2CE0126 - DUP  
(WIN ID + DUP)

| Parameter Suite             | Parameter Methods                                                                                                                                                                                                                                                                      | Preservation                                                                                               | Lot#      | Expiration | pH Chec                                |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-----------|------------|----------------------------------------|
| Preserved Nutrients         | <input checked="" type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                                                                                                                                                        | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H <sub>2</sub> SO <sub>4</sub> | SA7341020 | 12/7/18    | <input checked="" type="checkbox"/> <2 |
| Metals                      | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-ICP                                                                                                                                                                                                                        | <input type="checkbox"/> Ice <input type="checkbox"/> HNO <sub>3</sub>                                     |           |            | <input type="checkbox"/> <2            |
| Filtered Nutrients          | <input checked="" type="checkbox"/> W-PO4-F <input checked="" type="checkbox"/> Field Filtered 0.45 µm Filter                                                                                                                                                                          | <input checked="" type="checkbox"/> Ice                                                                    | 13615055  |            |                                        |
| Chlorophyll                 | <input type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                    | <input type="checkbox"/> Ice                                                                               |           |            |                                        |
| Physical/Aggregate (Fresh)  | <input checked="" type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CH-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                                        | <input checked="" type="checkbox"/> Ice                                                                    |           |            |                                        |
| Physical/Aggregate (Marine) | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY                                                                                                                                                                                                                          | <input type="checkbox"/> Ice                                                                               |           |            |                                        |
| Microbiology                | <input checked="" type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci                                                                                                                                                                        | <input checked="" type="checkbox"/> Ice                                                                    |           |            |                                        |
| Molecular                   | <input type="checkbox"/> PCR-FILTER <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR                                                                                                               |                                                                                                            |           |            |                                        |
| Tracers                     | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                                                                                                                            |                                                                                                            |           |            |                                        |
| Pesticides                  | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-CARE<br><input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH <input type="checkbox"/> W-SUC- |                                                                                                            |           |            |                                        |

Field ID → G2CE0126\_DUP  
WIN → G2CE0126  
Location → Spring Garden Creek just DS of Deep Creek

Contains: 1:1 H2SO4  
Lot No.: SA7341020  
Expires: 12/07/18  
See Safety Data Sheet (SDS)

Place Preservation

## Blank

Time Zone: EST CEN Time: 1246 Field ID: BLANK\_03272018  
(BLANK\_DMMYYYYY)

DI Source: WASH ROOM Location: Back of truck

☒ Field Blank ☐ Equipment Blank ☐ Field Cleaned Equipment Blank Equipment ID: DI # 4

| Parameter Suite             | Parameter Methods                                                                                                                                                                                                                                                                      | Preservation                                                                                               | Lot#      | Expiration | pH Chec                                |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-----------|------------|----------------------------------------|
| Preserved Nutrients         | <input checked="" type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                                                                                                                                                        | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H <sub>2</sub> SO <sub>4</sub> | SA7341020 | 12/7/18    | <input checked="" type="checkbox"/> <2 |
| Metals                      | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-ICP                                                                                                                                                                                                                        | <input type="checkbox"/> Ice <input type="checkbox"/> HNO <sub>3</sub>                                     |           |            | <input type="checkbox"/> <2            |
| Filtered Nutrients          | <input checked="" type="checkbox"/> W-PO4-F <input checked="" type="checkbox"/> Field Filtered 0.45 µm Filter                                                                                                                                                                          | <input checked="" type="checkbox"/> Ice                                                                    | 13615055  |            |                                        |
| Chlorophyll                 | <input type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                    | <input type="checkbox"/> Ice                                                                               |           |            |                                        |
| Physical/Aggregate (Fresh)  | <input checked="" type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CH-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                                        | <input checked="" type="checkbox"/> Ice                                                                    |           |            |                                        |
| Physical/Aggregate (Marine) | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY                                                                                                                                                                                                                          | <input type="checkbox"/> Ice                                                                               |           |            |                                        |
| Microbiology                | <input type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci                                                                                                                                                                                   | <input type="checkbox"/> Ice                                                                               |           |            |                                        |
| Molecular                   | <input type="checkbox"/> PCR-FILTER <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR                                                                                                               |                                                                                                            |           |            |                                        |
| Tracers                     | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                                                                                                                            |                                                                                                            |           |            |                                        |
| Pesticides                  | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-CARE<br><input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH <input type="checkbox"/> W-SUC- |                                                                                                            |           |            |                                        |

Field ID → BLANK\_03272018  
Location/DI Source → Washroom

Contains: 1:1 H2SO4  
Lot No.: SA7341020  
Expires: 12/07/18  
See Safety Data Sheet (SDS)

## Notes:

gate code  
2121

WIN ID / Field ID →

Spring Garden Creek  
just DS of Deep Creek  
(2921F)

G2CE0126

Signature:

Date:

3/27/18

Enter Field Parameters, Verify Station ID In LIMS DMT:

Kmw 4/6/18  
(Initials/Date)

QC Station ID, Field Parameters In LIMS DMT:

212 4/11/18  
(Initials/Date)

Scan/Save Field Sheets

Migrate Data to WIN:

Verify Data In WIN:



|          |                                                                                                    |                |                 |               |               |                                     |                        |
|----------|----------------------------------------------------------------------------------------------------|----------------|-----------------|---------------|---------------|-------------------------------------|------------------------|
| Group: A | Bottle Type:<br>ALKALINITY<br>TURBIDITY<br>W-CL-IC<br>W-COLOR<br>W-F<br>W-SO4-IC<br>W-TDS<br>W-TSS | P-1L           | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1                      |
| Group: A | Bottle Type:<br>CD-FLR-ECQ                                                                         | P-250ML-WI-THI | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1 sent to contract lab |
| Group: A | Bottle Type:<br>CHLSUITE-W                                                                         | BP-1L          | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1                      |
| Group: A | Bottle Type:<br>W-NH3<br>W-NO2NO3<br>W-S-A-TP<br>W-TKN<br>W-TOC                                    | P-500ML        | # of Bottles: 1 | Preservative: | ICE And H2SO4 | Enter Number of Bottles Sent to Lab | 1                      |
| Group: A | Bottle Type:<br>W-PO4-F                                                                            | P-125ML        | # of Bottles: 1 | Preservative: | FILTER-ICE    | Enter Number of Bottles Sent to Lab | 1                      |
| Group: B | Bottle Type:<br>ALKALINITY<br>TURBIDITY<br>W-CL-IC<br>W-COLOR<br>W-F<br>W-SO4-IC<br>W-TDS<br>W-TSS | P-1L           | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1                      |
| Group: B | Bottle Type:<br>CD-FLR-ECQ                                                                         | P-250ML-WI-THI | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1 sent to contract lab |
| Group: B | Bottle Type:                                                                                       | P-500ML        | # of Bottles: 1 | Preservative: | ICE And H2SO4 | Enter Number of Bottles Sent to Lab |                        |

|          |              |         |                 |                             |                                     |  |
|----------|--------------|---------|-----------------|-----------------------------|-------------------------------------|--|
| Group: B | 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: B | Bottle Type: | P-125ML | # of Bottles: 1 | Preservative: FILTER-ICE    | Enter Number of Bottles Sent to Lab |  |
|          | W-PO4-F      |         |                 |                             |                                     |  |
| Group: C | 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: C | 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: C | Bottle Type: | P-125ML | # of Bottles: 1 | Preservative: FILTER-ICE    | Enter Number of Bottles Sent to Lab |  |
|          | W-PO4-F      |         |                 |                             |                                     |  |



Department of Environmental Protection  
3319 Maguire Blvd Suite 232, Orlando, FL 32803  
Natalie Ayala / Michael Linger / Kalina Warren  
Michael.Linger@dep.state.fl.us  
(407) 897-4100

Sampler Names: Mike Linger / Mike Drennen Signature: [Signature]

| FIELD ID     | Lab No.<br>(Lab Use Only) | Date    | Time Sampled | No. of Containers | Grab | Composite | Preservative |     |      |      | Matrix      |            |                |               |                        |                   | Analyze For:        |  |  |
|--------------|---------------------------|---------|--------------|-------------------|------|-----------|--------------|-----|------|------|-------------|------------|----------------|---------------|------------------------|-------------------|---------------------|--|--|
|              |                           |         |              |                   |      |           | ICE          | HCL | HNO3 | NONE | Groundwater | Wastewater | Drinking Water | Surface Water | Escherichia Coli (ECQ) | Enterococci (ENO) | Fecal Coliform (FC) |  |  |
| 62CE0126     |                           | 3/27/18 | 12:11        | 1                 | X    |           | X            |     |      |      |             |            | X              |               |                        |                   |                     |  |  |
| 62CE0126-DUP |                           | 3/27/18 | 12:15        | 1                 | X    |           |              |     |      |      |             |            | X              |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |
|              |                           |         |              |                   |      |           |              |     |      |      |             |            |                |               |                        |                   |                     |  |  |

**Special Instructions:**

Samples are ambient water and not suspected to contain chlorine

|                  |         |      |              |      |       |                                  |
|------------------|---------|------|--------------|------|-------|----------------------------------|
| Relinquished by: | Date    | Time | Received by: | Date | Time  | Comments                         |
| <i>D. K. L.</i>  | 3/27/18 | 1421 | <i>MM</i>    | 3/27 | 14521 | Temp<br>Upon Receipt : 0.1°      |
| Relinquished by: | Date    | Time | Received by: | Date | Time  | Sample Containers Intact?<br>Y N |
|                  |         |      |              |      |       |                                  |