

# Log-in Checklist

RQ- 2018-03-28-48

Shipping Method: FedEx | UPS | HD | Greyhound | \_\_\_\_\_

Date/Time of Receipt: 3/28/18 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       | 2.3°C               | 5                               |               | <input checked="" type="checkbox"/> |          |    |                                                       |
|           |                     |                                 |               |                                     |          |    |                                                       |
|           |                     |                                 |               |                                     |          |    |                                                       |
|           |                     |                                 |               |                                     |          |    |                                                       |
|           |                     |                                 |               |                                     |          |    |                                                       |
|           |                     |                                 |               |                                     |          |    |                                                       |

\*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 \_\_\_\_\_

Micro-Biology Overflow 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-E8321-DI, -MS, -21                                                                                 |     |    | W-NP-AA-SF |     |    |
| W-BNA (-625, -R)                                                                                     |     |    | W-PDQUAT   |     |    |
| W-CARB-AA (-CAB-AA-R)                                                                                |     |    | W-PCL-SQ-R |     |    |
| W-U2060-MS                                                                                           |     |    | W-TR-TQ    |     |    |
| W-PCB-R                                                                                              |     |    | W-CT-CI-R  |     |    |
| W-PAH (-R)                                                                                           |     |    | W-PSNP-TQ  |     |    |

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

\*\*Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No \_\_\_\_\_ NA \_\_\_\_\_ Init: 9.0.

\*\*W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes \_\_\_\_\_ No ☒ NA ☒ Init: 9.0.

Coolers Unpacked/Checked by: 9.0. Date: 3/28/18 NCRs (Y/N)? \_\_\_\_\_

Event ID: CEM-DIST-2018-03-28-02 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:**

## Central Laboratory Submittal Form

Customer: CEN-DIST

Requester: Michael Linger

Field Report Prepared By:

Natalie Ayda

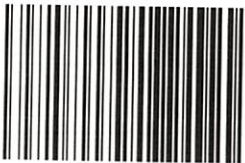
Project ID: SMP

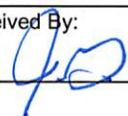
Collected By:

Alyse Howell / Kelly Yancy

Sampling Agency:

Volusia County

|              |                                                               |  |                                                                                   |  |                                                                           |  |                                                             |  |                                                                                       |  |                                                                      |  |                                   |  |  |
|--------------|---------------------------------------------------------------|--|-----------------------------------------------------------------------------------|--|---------------------------------------------------------------------------|--|-------------------------------------------------------------|--|---------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|-----------------------------------|--|--|
| Loc<br>L     | WIN ID / Field ID →                                           |  |  |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab)<br>Date 3/27/2018 Time 1020 |  | <input checked="" type="checkbox"/> Eastern<br><input type="checkbox"/> Central       |  | Composite end<br>Date Time                                           |  | Bottle<br>Group(s)<br>(See pg 2)  |  |  |
| Field        | Lake Harney Outfall<br>in Center of St. Johns<br>River (2964) |  |                                                                                   |  | Matrix (type, e.g., Salt, Fresh, etc)<br>Fresh                            |  | Diss. Oxygen<br>8.1 / 8.9%                                  |  | <input checked="" type="checkbox"/> mg/L<br><input checked="" type="checkbox"/> % sat |  | Total Res. Chlorine<br>(mg/L)                                        |  |                                   |  |  |
| WIN          | Latitude<br>28.793197                                         |  | Longitude<br>-81.058430                                                           |  | Temp<br>(C) 19.8                                                          |  | pH<br>7.81                                                  |  | Sample<br>Depth 0.3                                                                   |  | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m |  | Sp. Conductance<br>(umho/cm) 1301 |  |  |
|              |                                                               |  |                                                                                   |  | Salinity<br>(ppt) 0.65                                                    |  | Comments                                                    |  |                                                                                       |  |                                                                      |  |                                   |  |  |
| Location     |                                                               |  |                                                                                   |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            |  | Collection (comp begin or grab)<br>Date Time                |  | <input type="checkbox"/> Eastern<br><input type="checkbox"/> Central                  |  | Composite end<br>Date Time                                           |  | Bottle<br>Group(s)                |  |  |
| Field ID     |                                                               |  |                                                                                   |  | Matrix (type, e.g., Salt, Fresh, etc)                                     |  | Diss. Oxygen                                                |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat                       |  | Total Res. Chlorine<br>(mg/L)                                        |  |                                   |  |  |
| WIN/STORET # |                                                               |  |                                                                                   |  | Temp<br>(C)                                                               |  | pH                                                          |  | Sample<br>Depth                                                                       |  | <input type="checkbox"/> ft<br><input type="checkbox"/> m            |  | Sp. Conductance<br>(umho/cm)      |  |  |
| Latitude     |                                                               |  |                                                                                   |  | Longitude                                                                 |  | Salinity<br>(ppt)                                           |  | Comments                                                                              |  |                                                                      |  |                                   |  |  |
| Location     |                                                               |  |                                                                                   |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            |  | Collection (comp begin or grab)<br>Date Time                |  | <input type="checkbox"/> Eastern<br><input type="checkbox"/> Central                  |  | Composite end<br>Date Time                                           |  | Bottle<br>Group(s)                |  |  |
| Field ID     |                                                               |  |                                                                                   |  | Matrix (type, e.g., Salt, Fresh, etc)                                     |  | Diss. Oxygen                                                |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat                       |  | Total Res. Chlorine<br>(mg/L)                                        |  |                                   |  |  |
| WIN/STORET # |                                                               |  |                                                                                   |  | Temp<br>(C)                                                               |  | pH                                                          |  | Sample<br>Depth                                                                       |  | <input type="checkbox"/> ft<br><input type="checkbox"/> m            |  | Sp. Conductance<br>(umho/cm)      |  |  |
| Latitude     |                                                               |  |                                                                                   |  | Longitude                                                                 |  | Salinity<br>(ppt)                                           |  | Comments                                                                              |  |                                                                      |  |                                   |  |  |
| Location     |                                                               |  |                                                                                   |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            |  | Collection (comp begin or grab)<br>Date Time                |  | <input type="checkbox"/> Eastern<br><input type="checkbox"/> Central                  |  | Composite end<br>Date Time                                           |  | Bottle<br>Group(s)                |  |  |
| Field ID     |                                                               |  |                                                                                   |  | Matrix (type, e.g., Salt, Fresh, etc)                                     |  | Diss. Oxygen                                                |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat                       |  | Total Res. Chlorine<br>(mg/L)                                        |  |                                   |  |  |
| WIN/STORET # |                                                               |  |                                                                                   |  | Temp<br>(C)                                                               |  | pH                                                          |  | Sample<br>Depth                                                                       |  | <input type="checkbox"/> ft<br><input type="checkbox"/> m            |  | Sp. Conductance<br>(umho/cm)      |  |  |
| Latitude     |                                                               |  |                                                                                   |  | Longitude                                                                 |  | Salinity<br>(ppt)                                           |  | Comments                                                                              |  |                                                                      |  |                                   |  |  |
| Location     |                                                               |  |                                                                                   |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            |  | Collection (comp begin or grab)<br>Date Time                |  | <input type="checkbox"/> Eastern<br><input type="checkbox"/> Central                  |  | Composite end<br>Date Time                                           |  | Bottle<br>Group(s)                |  |  |
| Field ID     |                                                               |  |                                                                                   |  | Matrix (type, e.g., Salt, Fresh, etc)                                     |  | Diss. Oxygen                                                |  | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat                       |  | Total Res. Chlorine<br>(mg/L)                                        |  |                                   |  |  |
| WIN/STORET # |                                                               |  |                                                                                   |  | Temp<br>(C)                                                               |  | pH                                                          |  | Sample<br>Depth                                                                       |  | <input type="checkbox"/> ft<br><input type="checkbox"/> m            |  | Sp. Conductance<br>(umho/cm)      |  |  |
| Latitude     |                                                               |  |                                                                                   |  | Longitude                                                                 |  | Salinity<br>(ppt)                                           |  | Comments                                                                              |  |                                                                      |  |                                   |  |  |

|                  |           |                 |                            |                                                                                       |               |
|------------------|-----------|-----------------|----------------------------|---------------------------------------------------------------------------------------|---------------|
| Relinquished By: | Date/Time | Shipping Method | Number of Coolers Shipped: | Received By:                                                                          | Date/Time     |
|                  |           |                 |                            |  | 3/28/18 10:30 |

|          |              |                |                 |               |               |                                     |                                   |
|----------|--------------|----------------|-----------------|---------------|---------------|-------------------------------------|-----------------------------------|
| 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: | P-250ML-WI-THI | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1                                 |
|          | CD-FLR-ECQ   |                |                 |               |               |                                     | * Sample submitted to Flowers Lab |
| 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: | HNO3          | Enter Number of Bottles Sent to Lab | 1                                 |
|          | W-ICP        |                |                 |               |               |                                     |                                   |
|          | W-ICPMS      |                |                 |               |               |                                     |                                   |
| 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: | FILTER-ICE    | Enter Number of Bottles Sent to Lab | 1                                 |
|          | W-PO4-F      |                |                 |               |               |                                     |                                   |

Check Box That Applies To Your Location

☒ Flowers Chemical Laboratories, Inc.

481 Newburyport Ave.  
Altamonte Springs, FL 32701  
Bus: 407-339-5984  
Fax: 407-260-6110

☐ Flowers Chemical Labs-South

West Park Industrial Plaza  
571 N.W. Mercantile Pl., Ste. 111  
Port St. Lucie, FL 34986  
Bus: 772-343-8006  
Fax: 772-343-8089

☐ Flowers Chemical Labs-North

812 S.W. Harvey Greene Dr.  
Madison, FL 32340  
Bus: 850-973-6878  
Fax: 850-973-6878

☐ Flowers Chemical Labs-Keys

3980 Overseas Highway, Ste. 103  
Marathon, FL 33050  
Bus: 305-743-8598  
Fax: 305-743-8598

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|                                                                  |                                                                         |        |    |    |                        |
|------------------------------------------------------------------|-------------------------------------------------------------------------|--------|----|----|------------------------|
| Client<br><b>FDEP</b>                                            | Project Name<br><b>SMP RQ-2019-03-26-47</b>                             | P.O. # |    |    |                        |
| Address<br><b>3319 Maguire Blvd Ste 232<br/>Orlando FL 32804</b> | Client Contact<br><b>Natalie Ayala</b>                                  | FAX    |    |    |                        |
| Phone<br><b>407-897-4178</b>                                     | FCL Project Manager                                                     | E-MAIL |    |    |                        |
| Requested Due Date<br>10 Day Standard                            | OR <table border="1"><tr><td>MM</td><td>DD</td><td>YY</td></tr></table> | MM     | DD | YY | Rush Charges May Apply |
| MM                                                               | DD                                                                      | YY     |    |    |                        |

|                                                                          |                   |                         |                    |
|--------------------------------------------------------------------------|-------------------|-------------------------|--------------------|
| Sampled By (PRINT):<br><b>Alyse Howell / Kelly Young / Natalie Ayala</b> | Pick-Up Fee<br>\$ | Vehicle Surcharge<br>\$ | Sampling Fee<br>\$ |
|--------------------------------------------------------------------------|-------------------|-------------------------|--------------------|

|                                         |                                  |               |                  |          |                    |
|-----------------------------------------|----------------------------------|---------------|------------------|----------|--------------------|
| Sampler Signature<br><i>[Signature]</i> | Date Sampled<br><b>3/27/2018</b> | PRESERVATIVES | ANALYSES REQUEST | COMMENTS | Total # Containers |
|-----------------------------------------|----------------------------------|---------------|------------------|----------|--------------------|

GW - ground water DW - drinking water WW - wastewater  
SW - surface water SO - soil/solid SL - sludge HW - waste

| ITEM NO. | SAMPLE ID           | DATE               | TIME            | MATRIX        | (LAB USE ONLY) LAB NO. | NONE | H <sub>2</sub> SO <sub>4</sub> | HNO <sub>3</sub> | HCl | Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub> |  |  |  |  |  |  |  |  |  |  |
|----------|---------------------|--------------------|-----------------|---------------|------------------------|------|--------------------------------|------------------|-----|-----------------------------------------------|--|--|--|--|--|--|--|--|--|--|
| 1        | <del>62CE0086</del> | <del>3/27/18</del> | <del>1205</del> | <del>SW</del> | <del>NA</del>          |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 2        | 62CE0173            | 3/27/18            | 1020            | SW            |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 3        |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 4        |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 5        |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 6        |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 7        |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 8        |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 9        |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |
| 10       |                     |                    |                 |               |                        |      |                                |                  |     |                                               |  |  |  |  |  |  |  |  |  |  |

|                               |      |      |                           |      |      |                               |      |      |                           |      |      |
|-------------------------------|------|------|---------------------------|------|------|-------------------------------|------|------|---------------------------|------|------|
| Relinquished By / Affiliation | Date | Time | Accepted By / Affiliation | Date | Time | Relinquished By / Affiliation | Date | Time | Accepted By / Affiliation | Date | Time |
| <i>[Signature]</i> / FDEP     | 3/27 | 1336 |                           |      |      |                               |      |      | <i>[Signature]</i> / FDEP | 3/27 | 1336 |

FINANCE CHARGES APPLIED TO PAST DUE INVOICES

• WHITE - Lab Copy - To Be Scanned

• YELLOW - Client Copy

Date of Request: 08-MAR-2018  
 Created By: LINGER\_M On: 08-MAR-2018  
 Modified By: SWANSON\_C On: 15-MAR-2018  
 Customer: CEN-DIST  
 Project: SMP  
 Division: Division of Environmental Assessment and Restoration  
 District: Central District  
 Sampling Event: SJR (2964) (VolCo)

**Send Coolers To:**

Phone: 407-897-4180  
 FL Dept. of Environmental Protection  
 3319 Maguire Blvd., Suite 232  
 Orlando, FL 32803-3767  
 Attn: Mike Linger

Program Module Number: 1306  
 Priority: 3  
 Event Status: S  
 Criminal Investigation: NO  
 Chemistry Request Reviewed By: WATTS\_J On: 14-MAR-2018  
 Biology Request Reviewed By: SWANSON\_C On: 15-MAR-2018  
 Sampling Kit Required: YES Ship on: 19-MAR-2018  
 Sampling Kit Shipped: YES On: 16-MAR-2018  
 Sampling Kit Packed By: REAVES\_S  
 Preservatives Needed: NO  
 Date to Receive Samples: 26-MAR-2018  
 Received By:

**Send Final Report To:**

FL Dept. of Environmental Protection  
 3319 Maguire Blvd., Suite 232  
 Orlando, FL 32803-3767  
 Attn: Mike Linger

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

Comments:

**Bottle Group A (Water) With 1 Samples:**

|                      |                      |                                                                                                                                                |
|----------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| Bottle Type: P-1L    | Number of Bottles: 1 | Preserved With: ICE                                                                                                                            |
| ALKALINITY           | Template: DEFAULT    | (SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO <sub>3</sub> /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:         | Number of Bottles: 1 | Preserved With: ICE                                                                                                                            |
| CD-FLR-ECQ           | Template: DEFAULT    | (SM 9223 Quanti-Tray) Escherichia coli by Colilert 18 Quanti-Tray method by FlowersOverflow Laboratory for Central District                    |
| Bottle Type: BP-1L   | Number of Bottles: 1 | 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: 1 | Preserved With: HNO <sub>3</sub>                                                                                                               |
| W-ICP                | Template:            | (EPA 200.7 Rev. 4.4) Total Recoverable Metals analysis using ICP emission spectroscopy for aqueous samples supporting Clean Water Act Projects |
| Calcium              |                      |                                                                                                                                                |
| Chromium             |                      |                                                                                                                                                |
| Iron                 |                      |                                                                                                                                                |
| Magnesium            |                      |                                                                                                                                                |
| Nickel               |                      |                                                                                                                                                |
| Potassium            |                      |                                                                                                                                                |
| Sodium               |                      |                                                                                                                                                |
| Zinc                 |                      |                                                                                                                                                |

**Bottle Group A (Water) With 1 Samples:**

Bottle Type: P-500ML      Number of Bottles: 1      Preserved With: HNO3  
W-ICPMS      Template:      (EPA 200.8 Rev. 5.4) Total Recoverable Metals analysis using ICP-MS for aqueous samples supporting Clean Water Act Projects

Arsenic  
Cadmium  
Copper  
Lead  
Silver

Bottle Type: P-500ML      Number of Bottles: 1      Preserved With: ICE And H2SO4  
W-NH3      Template: DEFAULT      (EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L  
W-NO2NO3      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: 1      Preserved With: FILTER-ICE  
W-PO4-F      Template: DEFAULT      (EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

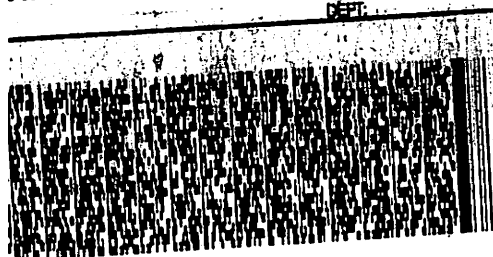
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TATES US

SHIP DATE: 18 MAR 18  
ACTWGT: 20.00 LB  
CAD: 100182098/NET3980

ZAD SHAIK  
DEP  
DEP CHEMISTRY SECTION  
10 BLAIR STONE RD  
LLAHASSEE FL 32399  
5-8085 REF:

5521107F5DCAS



FedEx.  
# 7907 9435 3583

WED - 28 MAR 10:30A  
PRIORITY OVERNIGHT

32399  
FL-US  
TLH

6 TLHA



FID 5837366 27MAR18 ORLA 546C1/87F5/8C8A