

Client: FDEP
Address: 2600 Blair Stone Rd.
Tallahassee, FL 32399
Phone: 850-245-8085
Fax: _____

Report To: dep-Overflowmicro@dep.state.fl.us
Bill to: Carina Tull
P.O. #: Lab #039

Preservative: HCL = H, HNO₃ = N, Na₂S₂O₃ = ST
H₂SO₄ = S, NaOH = SH, NH₄Cl = NH

Project Name: SMP: SFM
Project Location: Lee County
Customer Type: 8052
Kit #: 2018-02-12-29
Requested Due Date: _____

Sampled By (PRINT) <u>STUE COFONE</u>		Preservatives		Analysis Requested												Sample ID# (Lab Use Only)		
Sampler Signature <u>[Signature]</u>		Sample																
Matrix	Sample Description	Date	Time	Type	H	N	S	ST	S	SH	NH							
F	MANUEL BRANCH @ BW	2/14/18	0830	G					X									1A
	GSD 0078																	
F	WINKLER CANAL @ PRINCE	2/14/18	0900	G					X									2A
	GSD 0055																	
F	OAK CREEK @ OAK @ PRINCE	2/14/18	1045	G					X									3A
	GSD 0050																	
Relinquished By/Affiliation	Date	Time	Accepted By/Affiliation	Date	Time													
COFONE / FTM SOROC	2/14/18	0830	Minile [Signature]	2-14-18	1230													
Client Initial:																		
Samples On Ice																		
Yes No																		