



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2018

Data Qualified?

Yes / No

WIN Station Name: Baker Creek @ Thonotosassa Rd

Date: 7-30-18

WIN/ Field ID: G2SW0012

WBID: 1522C

Latitude: 28.04787

County: Hillsborough

ORG ID: 21FLTPA

Longitude: -82.26797

Receiving Body of Water: Lake Thonotosassa

RQ-2018-07-30-14

| Sampling Team Members |  |  |  |  | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|--|--|--|--|-----------------|-------------------|---------------|--------------|--------------------|
| Judy Ashton           |  |  |  |  | X               | X                 |               |              |                    |
| Ben Paswater          |  |  |  |  |                 | X                 |               |              |                    |

| Sampling Equipment                                   |                                   |                               |
|------------------------------------------------------|-----------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> Sample Container | <input type="checkbox"/> Van Dorn | <input type="checkbox"/> Pole |
| <input type="checkbox"/> Carboy                      | <input type="checkbox"/> Syringe  |                               |
| <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Other    |                               |
| Depth Measured with Secchi                           |                                   |                               |
| Equipment ID                                         |                                   |                               |

| Collection Method                          |                                         |
|--------------------------------------------|-----------------------------------------|
| <input checked="" type="checkbox"/> Wading | <input type="checkbox"/> Canoe/Kayak    |
| <input type="checkbox"/> From Shore        | <input type="checkbox"/> Electric Motor |
| <input type="checkbox"/> Other             | <input type="checkbox"/> Gasoline Motor |

Water Level: Dry/ Pooled/ Low / Normal / High / Flooded

Meter ID#

Matrix: Fresh / Marine / DI

Photos: Yes / No

Flow: No Flow / Interstitial / Flowing / NA

Tide: Rising/ Falling/ Slack/ NA

Tide Times: High Low

| Time Zone | Time | Total Depth (m) | Sample Depth (m) | Secchi Disk (m) | DO (mg/L) | DO (%SAT) | pH   | Salinity (PPTH) | Sp COND (µmhos/cm) | Temp. (C°) |
|-----------|------|-----------------|------------------|-----------------|-----------|-----------|------|-----------------|--------------------|------------|
| EST       | 1125 | 0.3             | 0.3              | 0.3             | 3.85      | 48.5      | 6.40 | 0.07            | 156.4              | 26.9       |
|           |      |                 |                  | 5'              |           |           |      |                 |                    |            |

Biological Samples Collected: Non HA SCI RPS Algae ID LVS LVI Other:

SBIO ID Numbers: SBIO-ID: HA-ID: RPS-ID: Macrophyte-ID: LIMS#:

| Parameter Suite             | Parameter Methods                                                                                                                                                                                                                                                                          | Preservation                                                | Lot# | Expiration | pH Check                    |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------|------------|-----------------------------|
| Preserved Nutrients         | <input type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                                                                                                                                                                       | <input type="checkbox"/> Ice <input type="checkbox"/> H2SO4 |      |            | <input type="checkbox"/> <2 |
| Metals                      | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-ICP                                                                                                                                                                                                                            | <input type="checkbox"/> Ice <input type="checkbox"/> HNO3  |      |            | <input type="checkbox"/> <2 |
| Filtered Nutrients          | <input type="checkbox"/> W-PO4-F <input type="checkbox"/> Field Filtered 0.45 µm Filter                                                                                                                                                                                                    | <input type="checkbox"/> Ice                                |      |            |                             |
| Chlorophyll                 | <input type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                        | <input type="checkbox"/> Ice                                |      |            |                             |
| Physical/Aggregate (Fresh)  | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                                                       | <input type="checkbox"/> Ice                                |      |            |                             |
| Physical/Aggregate (Marine) | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY                                                                                                                                                                                                                              | <input type="checkbox"/> Ice                                |      |            |                             |
| Macroinvertebrates          | <input type="checkbox"/> MI-FW-QLDC                                                                                                                                                                                                                                                        | <input type="checkbox"/> Formalin                           |      |            |                             |
| Periphyton                  | <input type="checkbox"/> ALGAE-ID                                                                                                                                                                                                                                                          | <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 checked="" type="checkbox"/> PCR-FILTER <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR-GFD                                                                                                    | <input checked="" type="checkbox"/> Ice                     |      |            |                             |
| Tracers                     | <input checked="" type="checkbox"/> W-SUC-AA-R <input checked="" type="checkbox"/> W-UHERB-AA <input checked="" type="checkbox"/> W-AHERB-AA                                                                                                                                               | <input checked="" type="checkbox"/> Ice                     |      |            |                             |
| Pesticides                  | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-CARB-AA <input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-GLYPH <input type="checkbox"/> W-SUC-AA-R | <input type="checkbox"/> Ice <input type="checkbox"/> Other |      |            |                             |

Notes: E Coli plus MT

Field ID/WIN

G2SW0012

D.O failed Calibration

Site Name: Baker Creek @ Thonotosassa Rd

SMP07302018-FB

Signature:

Date: 7-30-18

Enter Field Parameters, Verify Station ID in LIMS DMT: SM 0812712018

QC Station ID, Field Parameters in LIMS DMT: SM 111812018

Scan/Save Field Sheets

Migrate Data to WIN: 8373 SM 111812018

Verify Data in WIN: SM 1112712018

(Initials/Date)

(Initials/Date)

(Initials/Date)

# **QA/QC Sample Information Duplicate**

2 or 2

| <b>Time Zone:</b> EST CEN                                    |                                                                                                                                                                                                                                                                                               | <b>Time:</b> _____                                                                   |      | <b>Field ID:</b> _____ |                              |
|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------|------------------------|------------------------------|
| (WIN ID + DUP)                                               |                                                                                                                                                                                                                                                                                               |                                                                                      |      |                        |                              |
| Parameter Suite                                              | Parameter Methods                                                                                                                                                                                                                                                                             | Preservation                                                                         | Lot# | Expiration             | pH Check                     |
| <b>Preserved Nutrients</b>                                   | <input type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                                                                                                                                                                          | <input type="checkbox"/> Ice <input type="checkbox"/> H <sub>2</sub> SO <sub>4</sub> |      |                        | <input type="checkbox"/> < 2 |
| <b>Metals</b>                                                | <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 |
| <b>Filtered Nutrients</b>                                    | <input type="checkbox"/> W-PO4-F <input type="checkbox"/> Field Filtered 0.45 µm Filter                                                                                                                                                                                                       | <input type="checkbox"/> Ice                                                         |      |                        |                              |
| <b>Chlorophyll</b>                                           | <input type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                           | <input type="checkbox"/> Ice                                                         |      |                        |                              |
| Physical/Aggregate (Fresh)                                   | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                                                          | <input type="checkbox"/> Ice                                                         |      |                        |                              |
| Physical/Aggregate (Marine)                                  | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY                                                                                                                                                                                                                                 | <input type="checkbox"/> Ice                                                         |      |                        |                              |
| <b>Microbiology</b>                                          | <input type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci                                                                                                                                                                                          | <input type="checkbox"/> Ice                                                         |      |                        |                              |
| <b>Molecular</b>                                             | <input type="checkbox"/> PCR-FILTER <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR-GFD                                                                                                                  | <input type="checkbox"/> Ice                                                         |      |                        |                              |
| <b>Tracers</b>                                               | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                                                                                                                                   | <input type="checkbox"/> Ice                                                         |      |                        |                              |
| <b>Pesticides</b>                                            | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-CARB-AA<br><input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH <input type="checkbox"/> W-SUC-AA-R | <input type="checkbox"/> Ice<br><input type="checkbox"/> Other _____                 |      |                        |                              |
| <b>Place Preservative Sticker(s) Here<br/>(If Available)</b> |                                                                                                                                                                                                                                                                                               |                                                                                      |      |                        |                              |

## **Blank**

| <b>Time Zone:</b> EST CEN                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                               | <b>Time:</b> <u>1120</u>                                                             |      | <b>Field ID:</b> <u>BLANK - 07/30/2018</u> |                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------|--------------------------------------------|------------------------------|
| (Blank_DDMMYYY)                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                               |                                                                                      |      |                                            |                              |
| <b>DI Source:</b> <u>CAL BOY</u>                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                               | <b>Location:</b> <u>FIELD</u>                                                        |      |                                            |                              |
| <input type="checkbox"/> Field Blank <input type="checkbox"/> Equipment Blank <input type="checkbox"/> Field Cleaned Equipment Blank                                                                                                                     |                                                                                                                                                                                                                                                                                               | <b>Equipment ID:</b> _____                                                           |      |                                            |                              |
| Parameter Suite                                                                                                                                                                                                                                          | Parameter Methods                                                                                                                                                                                                                                                                             | Preservation                                                                         | Lot# | Expiration                                 | pH Check                     |
| <b>Preserved Nutrients</b>                                                                                                                                                                                                                               | <input type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                                                                                                                                                                          | <input type="checkbox"/> Ice <input type="checkbox"/> H <sub>2</sub> SO <sub>4</sub> |      |                                            | <input type="checkbox"/> < 2 |
| <b>Metals</b>                                                                                                                                                                                                                                            | <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 |
| <b>Filtered Nutrients</b>                                                                                                                                                                                                                                | <input type="checkbox"/> W-PO4-F <input type="checkbox"/> Field Filtered 0.45 µm Filter                                                                                                                                                                                                       | <input type="checkbox"/> Ice                                                         |      |                                            |                              |
| <b>Chlorophyll</b>                                                                                                                                                                                                                                       | <input type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                           | <input type="checkbox"/> Ice                                                         |      |                                            |                              |
| Physical/Aggregate (Fresh)                                                                                                                                                                                                                               | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                                                          | <input type="checkbox"/> Ice                                                         |      |                                            |                              |
| Physical/Aggregate (Marine)                                                                                                                                                                                                                              | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY                                                                                                                                                                                                                                 | <input type="checkbox"/> Ice                                                         |      |                                            |                              |
| <b>Microbiology</b>                                                                                                                                                                                                                                      | <input type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci                                                                                                                                                                                          | <input type="checkbox"/> Ice                                                         |      |                                            |                              |
| <b>Molecular</b>                                                                                                                                                                                                                                         | <input type="checkbox"/> PCR-FILTER <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR-GFD                                                                                                                  | <input type="checkbox"/> Ice                                                         |      |                                            |                              |
| <b>Tracers</b>                                                                                                                                                                                                                                           | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                                                                                                                                   | <input type="checkbox"/> Ice                                                         |      |                                            |                              |
| <b>Pesticides</b>                                                                                                                                                                                                                                        | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-CARB-AA<br><input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH <input type="checkbox"/> W-SUC-AA-R | <input type="checkbox"/> Other _____                                                 |      |                                            |                              |
| <b>Place Preservative Sticker(s) Here<br/>(If Available)</b>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                               |                                                                                      |      |                                            |                              |
| <b>Notes:</b> _____ <div style="float: right; text-align: right;"> <b>Field ID/WIN</b><br/> <br/> <b>BLANK</b><br/> <b>Site Name:</b> Field Blank_07/30/2018 </div> |                                                                                                                                                                                                                                                                                               |                                                                                      |      |                                            |                              |
| <b>Signature:</b> _____                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                               |                                                                                      |      |                                            | <b>Date:</b> _____           |

Baker Creek w/Dup &amp; Blank

## Central Laboratory Submittal Form

last revised Jan 25, 2018

Customer: SW-DIST

Requester: Judy Ashton

Field Report Prepared By: JA

Project ID: SMP

Collected By: Ben Paswater, Judy Ashton

Sampling Agency: SW ROC

|                                       |  |                                          |                                 |                                          |                                             |                                 |      |                               |
|---------------------------------------|--|------------------------------------------|---------------------------------|------------------------------------------|---------------------------------------------|---------------------------------|------|-------------------------------|
| Location                              |  | <input type="checkbox"/> Comp            | Collection (comp begin or grab) |                                          | <input checked="" type="checkbox"/> Eastern | Composite end                   |      | Bottle Group(s)<br>(See pg 2) |
| Field ID/WIN<br>G2SW0012              |  | <input checked="" type="checkbox"/> Grab | Date 7-30-18                    | Time 1125                                | Central                                     | Date                            | Time |                               |
| Matrix (type, e.g., Salt, Fresh, etc) |  | Diss. Oxygen                             |                                 | <input checked="" type="checkbox"/> mg/L | Total Res. Chlorine                         |                                 | A    |                               |
|                                       |  | 3.85                                     |                                 | <input type="checkbox"/> % sat           | (mg/L)                                      |                                 |      |                               |
| Temp (C) 26.9                         |  | pH 6.40                                  |                                 | Sample Depth 0.3                         | <input type="checkbox"/> ft                 | Sp. Conductance (umho/cm) 152.6 |      |                               |
| Salinity (ppt) 0.07                   |  | Comments E. coli dropped off 2 AL        |                                 |                                          |                                             |                                 |      |                               |
| Latitude                              |  | Longitude                                |                                 |                                          |                                             |                                 |      |                               |
| Field ID/WIN<br>BLANK                 |  | <input type="checkbox"/> Comp            | Collection (comp begin or grab) |                                          | <input checked="" type="checkbox"/> Eastern | Composite end                   |      | Bottle Group(s)               |
| Field ID                              |  | <input checked="" type="checkbox"/> Grab | Date 7-30-18                    | Time 1120                                | Central                                     | Date                            | Time |                               |
| Matrix (type, e.g., Salt, Fresh, etc) |  | Diss. Oxygen                             |                                 | <input type="checkbox"/> mg/L            | Total Res. Chlorine                         |                                 | A    |                               |
|                                       |  |                                          |                                 | <input type="checkbox"/> % sat           | (mg/L)                                      |                                 |      |                               |
| Temp (C)                              |  | pH 7.1                                   |                                 | Sample Depth                             | <input type="checkbox"/> ft                 | Sp. Conductance (umho/cm)       |      |                               |
| Salinity (ppt)                        |  | Comments NO E. coli                      |                                 |                                          |                                             |                                 |      |                               |
| Latitude                              |  | Longitude                                |                                 |                                          |                                             |                                 |      |                               |
| Location                              |  | <input type="checkbox"/> Comp            | Collection (comp begin or grab) |                                          | <input type="checkbox"/> Eastern            | Composite end                   |      | Bottle Group(s)               |
| Field ID                              |  | <input type="checkbox"/> Grab            | Date                            | Time                                     | Central                                     | Date                            | Time |                               |
| Matrix (type, e.g., Salt, Fresh, etc) |  | Diss. Oxygen                             |                                 | <input type="checkbox"/> mg/L            | Total Res. Chlorine                         |                                 |      |                               |
|                                       |  |                                          |                                 | <input type="checkbox"/> % sat           | (mg/L)                                      |                                 |      |                               |
| Temp (C)                              |  | pH                                       |                                 | Sample Depth                             | <input type="checkbox"/> ft                 | Sp. Conductance (umho/cm)       |      |                               |
| Salinity (ppt)                        |  | Comments                                 |                                 |                                          |                                             |                                 |      |                               |
| Latitude                              |  | Longitude                                |                                 |                                          |                                             |                                 |      |                               |
| Location                              |  | <input type="checkbox"/> Comp            | Collection (comp begin or grab) |                                          | <input type="checkbox"/> Eastern            | Composite end                   |      | Bottle Group(s)               |
| Field ID                              |  | <input type="checkbox"/> Grab            | Date                            | Time                                     | Central                                     | Date                            | Time |                               |
| Matrix (type, e.g., Salt, Fresh, etc) |  | Diss. Oxygen                             |                                 | <input type="checkbox"/> mg/L            | Total Res. Chlorine                         |                                 |      |                               |
|                                       |  |                                          |                                 | <input type="checkbox"/> % sat           | (mg/L)                                      |                                 |      |                               |
| Temp (C)                              |  | pH                                       |                                 | Sample Depth                             | <input type="checkbox"/> ft                 | Sp. Conductance (umho/cm)       |      |                               |
| Salinity (ppt)                        |  | Comments                                 |                                 |                                          |                                             |                                 |      |                               |
| Latitude                              |  | Longitude                                |                                 |                                          |                                             |                                 |      |                               |

|                              |                       |                         |                              |              |            |
|------------------------------|-----------------------|-------------------------|------------------------------|--------------|------------|
| Relinquished By: [Signature] | Date/Time: 7/30/18 4p | Shipping Method: Fed Ex | Number of Coolers Shipped: 1 | Received By: | Date/Time: |
|------------------------------|-----------------------|-------------------------|------------------------------|--------------|------------|

Ref:  
Dep:Date: 13Jul18  
Wgt: 9.00 LBS

DV:

 SHIPPING: 0.00  
 SPECIAL: 0.00  
 HANDLING: 0.00  
 TOTAL: 0.00

 VOB: PRIORITY OVERNIGHT  
 TRACK: 4385 5031 3630

|                                              |                             |                 |                   |                                     |   |
|----------------------------------------------|-----------------------------|-----------------|-------------------|-------------------------------------|---|
| Group: A                                     | Bottle Type: QPCR-P-500ML   | # of Bottles: 1 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 2 |
| PCR-FILTER                                   |                             |                 |                   |                                     |   |
| Group: A                                     | Bottle Type: P-120ML-WC-THI | # of Bottles: 1 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 1 |
| SWD-AEL-EC <i>E. COLI DROPPALS NOT 2 AEL</i> |                             |                 |                   |                                     |   |
| Group: A                                     | Bottle Type: BG-500ML       | # of Bottles: 1 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 2 |
| W-E8321-DI                                   |                             |                 |                   |                                     |   |
| W-E8321-MS                                   |                             |                 |                   |                                     |   |



|                                     |                                                                                                                        |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/>            | <b><u>Gainesville:</u></b> 4965 SW 41st Blvd. • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639                |
| <input type="checkbox"/>            | <b><u>Jacksonville:</u></b> 6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354           |
| <input type="checkbox"/>            | <b><u>Tallahassee:</u></b> 2639 North Monroe Street, Suite D • Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275 |
| <input checked="" type="checkbox"/> | <b><u>Tampa:</u></b> 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327                       |

|                                                                                                                                                                   |  |                                                                                                                          |  |                                                                                    |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------|--|
| Client Name: FDEP SW Dist.                                                                                                                                        |  | Project Name: SMP                                                                                                        |  | Tampa: 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 |  |
| Address: 13051 N. Telecom Pkwy. Temple Terrace FL 33637                                                                                                           |  | P.O. Number: B370AE                                                                                                      |  | BOTTLE SIZE & TYPE                                                                 |  |
| Phone: 813-470-5770                                                                                                                                               |  | Project Address:                                                                                                         |  | Analysis Required                                                                  |  |
| Contact: Judy Ashton 813-470-5772                                                                                                                                 |  | Special Instructions:<br>RQ-2018-                                                                                        |  | E. coli                                                                            |  |
| Sampled By:                                                                                                                                                       |  |                                                                                                                          |  |                                                                                    |  |
| Turn Around Time: <input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RUSH                                                                      |  |                                                                                                                          |  |                                                                                    |  |
| Page: 1 of 1                                                                                                                                                      |  | <input type="checkbox"/> ADAPT <input type="checkbox"/> EQUIS <input type="checkbox"/> Other                             |  |                                                                                    |  |
| Field ID/WIN: G2SW0012                                                                                                                                            |  | SAMPLING DATE: 7-30-18 TIME: 1125                                                                                        |  | NO. COUNT: 1                                                                       |  |
| Site Name: Baker Creek @ Thonotosassa Rd                                                                                                                          |  | MATRIX: SW                                                                                                               |  | PRE-SER. VOLUME: 100                                                               |  |
| Field ID/WIN: BLANK                                                                                                                                               |  | SAMPLING DATE: 7-30-18 TIME: 1125                                                                                        |  | NO. COUNT: 1                                                                       |  |
| Site Name: Field Blank_07/30/2018                                                                                                                                 |  | MATRIX: SW                                                                                                               |  | PRE-SER. VOLUME: 1                                                                 |  |
| Matrix Code: WW = wastewater SW = surface water GW = ground-water DW = drinking water O = oil A = air SO = soil SL = sludge                                       |  | Preservation Code: I = ice H = (HCl) S = (H2SO4) N = (HNO3) T = (Sodium Thiosulfate)                                     |  |                                                                                    |  |
| Received on Ice <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Temp taken from sample <input type="checkbox"/> Temp from blank |  | <input type="checkbox"/> Where required, pH checked                                                                      |  | Temperature when received: (in degrees celcius)                                    |  |
| DCN: AD-051 Form last revised 04/30/2015                                                                                                                          |  | Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: LT-1 LT-2 T: 0A A: 3A M: 3A S: 1V |  |                                                                                    |  |
| Relinquished by: A. H. H. Date: 7-30-18 Time: 1307                                                                                                                |  | Received by: Antreuch Date: 7-30-18 Time: 1307                                                                           |  | FOR DRINKING WATER USE:                                                            |  |
| PWS ID:                                                                                                                                                           |  |                                                                                                                          |  |                                                                                    |  |