



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2018

A-KIT

Data Qualified?  
Yes / No

WIN Station Name: TERRA CEIA BAY 24519

Date: 12/04/2018  
(mm/dd/yyyy)

WIN/ Field ID: G1SW0102

WBID: 1797A

Latitude: 27.56840  
(Decimal Degrees)

County: MANATEE

ORG ID: 21FLTPA

Longitude: -82.56890  
(Decimal Degrees)

Receiving Body of Water: GOM

RQ-2018- 12-03-27

| Sampling Team Members                                                          |       |                                                                                                                                                                              |                  |                 |           | WQ Measurements                                    | Sample Collection                                                                 | Documentation   | Preservation       | Preservation Check | Sampling Equipment                                   |                                         |                                        |                        |  |
|--------------------------------------------------------------------------------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|-----------|----------------------------------------------------|-----------------------------------------------------------------------------------|-----------------|--------------------|--------------------|------------------------------------------------------|-----------------------------------------|----------------------------------------|------------------------|--|
| Judy Ashton                                                                    |       |                                                                                                                                                                              |                  |                 |           |                                                    |                                                                                   |                 |                    |                    | <input checked="" type="checkbox"/> Sample Container | <input type="checkbox"/> Van Dorn       | <input type="checkbox"/> Pole          |                        |  |
| Ben Paswater                                                                   |       |                                                                                                                                                                              |                  |                 |           |                                                    |                                                                                   |                 |                    |                    | <input type="checkbox"/> Carboy                      | <input type="checkbox"/> Syringe        |                                        |                        |  |
| Sarah Meyer                                                                    |       |                                                                                                                                                                              |                  |                 |           |                                                    |                                                                                   |                 |                    |                    | <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Other          |                                        |                        |  |
|                                                                                |       |                                                                                                                                                                              |                  |                 |           |                                                    |                                                                                   |                 |                    |                    | Depth Measured with<br>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 / <u>(Normal)</u> / High / Flooded             |       |                                                                                                                                                                              |                  |                 |           | Meter ID# <u>Chewy</u>                             |                                                                                   |                 |                    |                    | Matrix: Fresh / <u>(Marine)</u> / DI                 |                                         |                                        |                        |  |
| Photos: Yes / <u>(No)</u>                                                      |       |                                                                                                                                                                              |                  |                 |           | Flow: No Flow / Intestinal / Flowing / <u>(NA)</u> |                                                                                   |                 |                    |                    | Tides: <u>(Rising)</u> / 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                                                                            | 10 50 | 1.4                                                                                                                                                                          | 0.3              | 0.8             | 6.25      | 87.2                                               | 7.55                                                                              | 30.02           | 46227              | 23.3               |                                                      |                                         |                                        |                        |  |
| CEN                                                                            |       |                                                                                                                                                                              |                  |                 |           |                                                    |                                                                                   |                 |                    |                    |                                                      |                                         |                                        |                        |  |
| Biological Samples Collected: <u>(None)</u> 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 checked="" type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                                              |                  |                 |           |                                                    | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 |                 | SA8274050          |                    | 10/01/19                                             |                                         | <input checked="" type="checkbox"/> <2 |                        |  |
| Metals                                                                         |       | <input checked="" type="checkbox"/> W-ICPMS <input checked="" type="checkbox"/> W-ICP                                                                                        |                  |                 |           |                                                    | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> HNO3  |                 | NA-8080070         |                    | 03/21/19                                             |                                         | <input checked="" 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                                           |                 |                    |                    |                                                      |                                         |                                        |                        |  |
| Chlorophyll                                                                    |       | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                                                               |                  |                 |           |                                                    | <input type="checkbox"/> Ice                                                      |                 |                    |                    |                                                      |                                         |                                        |                        |  |
| Physical/Aggregate (Fresh)                                                     |       | <input checked="" type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CHL / W-COLOR / W-SO4-CL / W-TDS                                                                |                  |                 |           |                                                    | <input checked="" 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 type="checkbox"/> E Coll <input checked="" type="checkbox"/> F Coll <input checked="" 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-GFD |                  |                 |           |                                                    | <input type="checkbox"/> Ice                                                      |                 |                    |                    |                                                      |                                         |                                        |                        |  |
| Tracers                                                                        |       | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                  |                  |                 |           |                                                    | <input 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"/> Ice                                                      |                 |                    |                    |                                                      |                                         |                                        |                        |  |
|                                                                                |       | <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"/> Other                                                    |                 |                    |                    |                                                      |                                         |                                        |                        |  |

Notes:

D-KIT, ~~FEACAL~~ FEACAL, ENTERO  
PESTICIDES

Field ID/WIN

G1SW0102



Site Name: Terra Ceia Bay @ US19

Signature:

*Sarah Meyer*

Date:

12/04/2018

Enter Field Parameters, Verify Station ID In LIMS DMT: SM 1/13/2019

QC Station ID, Field Parameters In LIMS DMT: SM 02/11/2019

Scan/Save Field Sheets SM 03/28/2019  
(Initials/Date)

Migrate Data to WIN: 9965 02/12/2019 SM  
(Initials/Date)

Verify Data In WIN: SM 03/28/2019  
(Initials/Date)

# QA/QC Sample Information Duplicate

| Time Zone: EST CEN          |                                                                                                                                                                                                                                                                                               | Time: _____                                                                          |      | Field ID: _____ |                             |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|------|-----------------|-----------------------------|
| (WIN ID + DUP)              |                                                                                                                                                                                                                                                                                               |                                                                                      |      |                 |                             |
| 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"/> H <sub>2</sub> SO <sub>4</sub> |      |                 | <input 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 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                                                         |      |                 |                             |
| 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-GFD                                                                                                                  | <input type="checkbox"/> Ice                                                         |      |                 |                             |
| Tracers                     | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                                                                                                                                   | <input type="checkbox"/> Ice                                                         |      |                 |                             |
| Pesticides                  | <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                       |      |                 |                             |

## Blank

| Time Zone: <u>EST</u> CEN                                                                                                                       |                                                                                                                                                                                                                                                                                               | Time: <u>1056</u>                                                                                          |                   | Field ID: <u>SMP12042018-FB</u> |                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------|----------------------------------------|
| (BLANK_DDMMYYYY)                                                                                                                                |                                                                                                                                                                                                                                                                                               |                                                                                                            |                   |                                 |                                        |
| DI Source: <u>FDEP SW ROC</u>                                                                                                                   |                                                                                                                                                                                                                                                                                               | Location: <u>Terra Ceia Bay</u>                                                                            |                   |                                 |                                        |
| <input checked="" type="checkbox"/> Field Blank <input type="checkbox"/> Equipment Blank <input type="checkbox"/> Field Cleaned Equipment Blank |                                                                                                                                                                                                                                                                                               | Equipment ID: _____                                                                                        |                   |                                 |                                        |
| Parameter Suite                                                                                                                                 | Parameter Methods                                                                                                                                                                                                                                                                             | Preservation                                                                                               | Lot#              | Expiration                      | pH Check                               |
| 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> | <u>SAB274050</u>  | <u>01/01/19</u>                 | <input checked="" type="checkbox"/> <2 |
| Metals                                                                                                                                          | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-ICP                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> HNO <sub>3</sub>               | <u>NA-8080070</u> | <u>03/21/19</u>                 | <input checked="" 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                                                                               |                   |                                 |                                        |
| 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-GFD                                                                                                                  | <input type="checkbox"/> Ice                                                                               |                   |                                 |                                        |
| Tracers                                                                                                                                         | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                                                                                                                                   | <input type="checkbox"/> Ice                                                                               |                   |                                 |                                        |
| Pesticides                                                                                                                                      | <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                                                                             |                   |                                 |                                        |

### Notes:

Field ID/WIN

BLANK



Site Name: FIELD BLANK\_12/04/2018

Signature:

*Sarah Meyer*

Date:

12/04/2018

Enter Field Parameters, Verify Station ID In LIMS DMT: SM 1/3/2019

(Initials/Date)

QC Station ID, Field Parameters In LIMS DMT: SM 02/11/2019

(Initials/Date)

Scan/Save Field Sheets SM 03/28/2019

(Initials/Date)

Migrate Data to WIN: 9965 02/12/2019 SM Verify Data In WIN: SM 03/28/2019

(Initials/Date)

(Initials/Date)

**Florida Department of Environmental Protection**  
**Central Laboratory Submittal Form**

Terra Ceia Bay

Customer: SW-DIST

Requester: Benjamin Paswater

Field Report Prepared By: S Meyer

Project ID: SMP

Collected By: B Paswater, S Meyer, J Ashton

Sampling Agency: FDEP SW ROC

|                                   |  |                                                                                      |  |                                                               |  |                                                                                 |  |                                                                      |  |                               |  |
|-----------------------------------|--|--------------------------------------------------------------------------------------|--|---------------------------------------------------------------|--|---------------------------------------------------------------------------------|--|----------------------------------------------------------------------|--|-------------------------------|--|
| Location                          |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab            |  | Collection (comp begin or grab)<br>Date 12/04/2018 Time 10:50 |  | <input checked="" type="checkbox"/> Eastern<br><input type="checkbox"/> Central |  | Composite end<br>Date _____ Time _____                               |  | Bottle Group(s)<br>(See pg 2) |  |
| Field ID/WIN<br><b>G1SW0102</b>   |  | Matrix (type, e.g., Salt, Fresh, etc)                                                |  | Diss. Oxygen<br>6.25                                          |  | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat      |  | Total Res. Chlorine<br>(mg/L) _____                                  |  | A/B                           |  |
| WIN/S                             |  | Temp (C) 23.3                                                                        |  | pH 7.55                                                       |  | Sample Depth 0.3                                                                |  | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m |  |                               |  |
| Site Name: Terra Ceia Bay @ US19  |  | Salinity (ppt) 30.02                                                                 |  | Comments: Enter 4 Fecal dropped @ AEL                         |  |                                                                                 |  |                                                                      |  |                               |  |
| Latitude                          |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms                          |  |                                                               |  |                                                                                 |  |                                                                      |  |                               |  |
| Location                          |  | <input checked="" type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab)<br>Date 12/04/2018 Time 10:56 |  | <input checked="" type="checkbox"/> Eastern<br><input type="checkbox"/> Central |  | Composite end<br>Date _____ Time _____                               |  | Bottle Group(s)               |  |
| Field ID/WIN<br><b>BLANK</b>      |  | 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)                                        |  | A                             |  |
| WIN/S                             |  | Temp (C)                                                                             |  | pH                                                            |  | Sample Depth                                                                    |  | <input type="checkbox"/> ft<br><input type="checkbox"/> m            |  |                               |  |
| Site Name: FIELD BLANK_12/04/2018 |  | Salinity (ppt)                                                                       |  | Comments                                                      |  |                                                                                 |  |                                                                      |  |                               |  |
| Latitude                          |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms                          |  |                                                               |  |                                                                                 |  |                                                                      |  |                               |  |
| 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 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 (C)                                                                             |  | pH                                                            |  | Sample Depth                                                                    |  | <input type="checkbox"/> ft<br><input type="checkbox"/> m            |  |                               |  |
| Latitude                          |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms                          |  | Longitude                                                     |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms                     |  | Salinity (ppt)                                                       |  | Comments                      |  |
| Location                          |  | <input checked="" type="checkbox"/> Comp<br><input checked="" 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 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 (C)                                                                             |  | pH                                                            |  | Sample Depth                                                                    |  | <input type="checkbox"/> ft<br><input type="checkbox"/> m            |  |                               |  |
| Latitude                          |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms                          |  | Longitude                                                     |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms                     |  | Salinity (ppt)                                                       |  | Comments                      |  |

|                              |                            |                        |                              |              |            |
|------------------------------|----------------------------|------------------------|------------------------------|--------------|------------|
| Relinquished By: Sarah Meyer | Date/Time: 12/04/2018 1700 | Shipping Method: FedEx | Number of Coolers Shipped: 2 | Received By: | Date/Time: |
|------------------------------|----------------------------|------------------------|------------------------------|--------------|------------|

|          |                                                    |                |                 |               |                            |                                     |   |
|----------|----------------------------------------------------|----------------|-----------------|---------------|----------------------------|-------------------------------------|---|
| Group: A | Bottle Type:                                       | P-1L           | # of Bottles: 1 | Preservative: | ICE                        | Enter Number of Bottles Sent to Lab | 2 |
|          | ALKALINITY<br>TURBIDITY<br>W-F<br>W-TSS            |                |                 |               |                            |                                     |   |
| Group: A | Bottle Type:                                       | BP-1L          | # of Bottles: 1 | Preservative: | ICE                        | Enter Number of Bottles Sent to Lab | 2 |
|          | CHLSUITE-W                                         |                |                 |               |                            |                                     |   |
| Group: A | Bottle Type:                                       | P-120ML-WC-THI | # of Bottles: 2 | Preservative: | ICE                        | Enter Number of Bottles Sent to Lab | 2 |
|          | SWD-AEL-EN<br>SWD-AEL-FC<br><i>* Dropped @ AEL</i> |                |                 |               |                            |                                     |   |
| Group: A | Bottle Type:                                       | P-500ML        | # of Bottles: 1 | Preservative: | HNO3                       | Enter Number of Bottles Sent to Lab | 2 |
|          | W-ICP<br>W-ICPMS                                   |                |                 |               |                            |                                     |   |
| Group: A | Bottle Type:                                       | P-500ML        | # of Bottles: 1 | Preservative: | ICE And H2SO4              | Enter Number of Bottles Sent to Lab | 2 |
|          | W-NH3<br>W-NO2NO3<br>W-S-A-TP<br>W-TKN<br>W-TOC    |                |                 |               |                            |                                     |   |
| Group: A | Bottle Type:                                       | P-125ML        | # of Bottles: 1 | Preservative: | FILTER-ICE                 | Enter Number of Bottles Sent to Lab | 2 |
|          | W-PO4-F                                            |                |                 |               |                            |                                     |   |
| Group: B | Bottle Type:                                       | BG-500ML       | # of Bottles: 1 | Preservative: | CH2CICOOH<br>Pre-Preserved | Enter Number of Bottles Sent to Lab | 1 |
|          | W-CARB-AA                                          |                |                 |               |                            |                                     |   |
| Group: B | Bottle Type:                                       | BG-500ML       | # of Bottles: 4 | Preservative: | ICE                        | Enter Number of Bottles Sent to Lab | 4 |
|          | W-CT-CI-R<br>W-PCL-SQ-R                            |                |                 |               |                            |                                     |   |
| Group: B | Bottle Type:                                       | BG-500ML       | # of Bottles: 1 | Preservative: | ICE                        | Enter Number of Bottles Sent to Lab | 1 |
|          | W-E8321-DI<br>W-E8321-MS                           |                |                 |               |                            |                                     |   |
| Group: B | Bottle Type:                                       | BG-1L          | # of Bottles: 4 | Preservative: | ICE                        | Enter Number of Bottles Sent to Lab | 4 |
|          | W-PSNP-TQ                                          |                |                 |               |                            |                                     |   |



|                                     |                                                                                                                        |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| <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>Miramar:</u></b> 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281                       |
| <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                       |

[illegible]