

Received Submittal form. ABG 01-23-18

Log-in Checklist

RQ-2018-01-22-31

Shipping Method: Fed Ex

Date/Time of Receipt: 2-23-18 11:40

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

**Note: If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

**Chain of Custody/ Field Sheet(s) Included? Yes ☒ No ☐

CONTAINER CHECK

**Evidence Tape on Bottles? Yes ☐ No ☐ If yes, is it intact? Yes ☐ No ☐

**Caps on tight? Yes ☐ No ☐ **Containers intact? Yes ☐ No ☐

**Sufficient Sample Volume: Yes ☐ No ☐

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R			W-CT-CI-R		

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ☐ No ☐ NA ☒ Init: ADG

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

Coolers Unpacked/Checked by: ADG Date: 1-23-18 NCRs (Y/N)? ☒

Event ID: 1443F entero
SW-DIST-2018-01-23-03 (SMP)
Date Received: 23-JAN-2018 10:40

NCR # ☐

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes_____ No_____

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes_____ No_____

If no, were samples shipped on dry ice? Yes_____ No_____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____

Additional Comments:

1443F entero

Customer: SW-DIST

Requester: Hannah Sprinkle

Field Report Prepared By: H. Sprinkle

Project ID: SMP

Collected By: H. Sprinkle

Sampling Agency: FDEP

Location	RQ-2018-01-22-31 Date: 01-22-2018 Time: 11:35		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 1/22/18 Time 1135	☒ Eastern ☐ Central	Composite end Date Time	Bottle Group(s) (See pg 2)	
Field ID	G2SW0035		Matrix (type, e.g., Salt, Fresh, etc) marine		Diss. Oxygen	☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L)	A	
STORET #	G2SW0035		Temp (C)		pH	Sample Depth	☐ ft ☒ m		Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms		Salinity (ppt)		Comments SAMPLE DROPPED OFF AT AEL				
Location			☐ Comp ☐ Grab		Collection (comp begin or grab) Date Time	☐ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)	
Field ID			Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
STORET #			Temp (C)		pH	Sample Depth	☐ ft ☐ m		Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms		Longitude		☐ dd ☐ dms	Salinity (ppt)			
Location			☐ Comp ☐ Grab		Collection (comp begin or grab) Date Time	☐ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)	
Field ID			Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
STORET #			Temp (C)		pH	Sample Depth	☐ ft ☐ m		Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms		Longitude		☐ dd ☐ dms	Salinity (ppt)			
Location			☐ Comp ☐ Grab		Collection (comp begin or grab) Date Time	☐ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)	
Field ID			Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
STORET #			Temp (C)		pH	Sample Depth	☐ ft ☐ m		Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms		Longitude		☐ dd ☐ dms	Salinity (ppt)			
Location			☐ Comp ☐ Grab		Collection (comp begin or grab) Date Time	☐ Eastern ☐ Central	Composite end Date Time	Bottle Group(s)	
Field ID			Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
STORET #			Temp (C)		pH	Sample Depth	☐ ft ☐ m		Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms		Longitude		☐ dd ☐ dms	Salinity (ppt)			

Relinquished By: H. Sprinkle	Date/Time 1/22/18	Shipping Method DROP OFF @ AEL	Number of Coolers Shipped: 2	Received By:	Date/Time
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01-23-18
10:40
COC received

Group: A Bottle Type: P-120ML-WC-THI # of Bottles: 1 Preservative: ICE Enter Number of Bottles Sent to Lab 1 dropped off @ AEL
SWD-AEL-EN



Advanced Environmental Laboratories, Inc.
6201 Goodfield Pkwy., Jacksonville, FL 32216 • 904.353.5350 • Fax 904.353.0054 • E782574
1010 Princess Pkwy. Ave., Tampa, FL 33610 • 813.630.5010 • Fax 813.630.4327 • E94542
2100 HWY 070 Phase, Cts. 7 • Clearwater, FL 34620 • 352.337.1530 • Fax 352.337.0060 • E2626
300 S. North Lake Blvd., Cts. 1010 • Alameda Citypark, FL 32701 • 407.537.1504 • Fax 407.537.1505

LAB NUMBER:

Page: _____ of _____

[illegible]

00528

FedEx
 Express[®] Package
 US Airbill
FedEx
Tracking
Number

8115 9551 7701

1 From

Date 1/22/18

Sender's
Name

M. BEARDEN

Phone

813 470 1100

Company

FOLP

Address

1051 N. Tuleen Pkwy

City

State

FL ZIP

33437

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone

850 245-8085

Company

FLORIDA DEPCHEMISTRY SECTION

Address

2200 BLAIRSTONE RD

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

Use this line for the bill-to location address or for continuation of your shipping address.

City

TALLAHASSEE

State

FL

ZIP

32309

0126912290



fedex.com 1800.GoFedEx 1800.463.3339

4 Express Package Service

 Packages up to 150 lbs.
 Packages over 150 lbs. use the
 FedEx Express Freight® service.

* To meet location

Next Business Day

☐ FedEx First Overnight
 Earliest next business morning delivery to select
 locations. Friday shipments will be delivered on
 Monday unless Saturday delivery is selected.

☒ FedEx Priority Overnight
 Next business morning. Friday shipments will be
 delivered on Monday unless Saturday delivery
 is selected.

☐ FedEx Standard Overnight
 Next business morning. Saturday delivery NOT
 available.

2 or 3 Business Days

☐ FedEx 2Day A.M.
 Second business morning. Saturday delivery NOT
 available.

☐ FedEx 2Day
 Second business afternoon. Thursday shipments
 will be delivered on Monday unless Saturday
 delivery is selected.

☐ FedEx Express Saver
 Third business day. Saturday delivery NOT
 available.

5 Packaging

* Declared value limit \$500.

☐ FedEx Envelope*

☐ FedEx Pak*

☐ FedEx Box

☐ FedEx Tube

☒ Other

6 Special Handling and Delivery Signature Options

Fees may apply. See the FedEx Service Guide.

☐ Saturday Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required

 Packages may be left without
 obtaining a signature for delivery.

☐ Direct Signature

Signature required at delivery.

☐ Indirect Signature

 If no one is available at recipient's
 address, the package will be left for
 residential deliveries only.

Does this shipment contain dangerous goods?

☒ No

☐ Yes

One box must be checked.

☐ Yes

☐ No

 Packages may be left without
 obtaining a signature for delivery.

☐ Direct Signature

☐ Indirect Signature

☐ No Signature Required

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