

RQ-2018-01-29-69

Log-in Checklist

Shipping Method: FedexDate/Time of Receipt: 1-30-18/10:00

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	Yes	No		
Red	-0.6	3		✓			

*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		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: SR

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

Coolers Unpacked/Checked by: SR Date: 1-30-18

NCRs (Y/N)? N

Event ID: SW-DIST-2018-01-30-01

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:

Baker ECOLI #1

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SW-DIST

Requester: Benjamin Paswater

Field Report Prepared By: H. Sprinkle

Project ID: SMP

Collected By: Ben Paswater

Sampling Agency: FDEP

Location		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 1/29/18 Time 1120		Eastern Central	Composite end Date Time		Bottle Group(s) (See pg 2)
Field ID	WIN/FIELD ID  G2SW0012	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 6.5 mg/L 71%	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		A
STORET	Baker Creek	Temp (C) 19.7	pH 7.28	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 194		
Latitude ☐ dd ☐ dms		Salinity (ppt) ☐ dd ☐ dms		Comments E. COLI DROPPED OUT @ 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) ☐ dd ☐ dms				
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) ☐ dd ☐ dms				
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) ☐ dd ☐ dms				
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) ☐ dd ☐ dms				

Relinquished By: Ben Paswater	Date/Time 1/24/18 1300	Shipping Method Fedex	Number of Coolers Shipped: 1	Received By: SR	Date/Time 1-30-18/10:00
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Group: A	Bottle Type: QPCR-P-250ML	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab	<u>2</u>
	PCR-FILTER				

Group: A	Bottle Type: P-120ML-WC-THI	# of Bottles: 1	Preservative: ICE	Enter Number of Bottles Sent to Lab	<u>1 to AEL overflow (dropped off)</u>
	SWD-AEL-EC				

Group: A	Bottle Type: BG-1L	# of Bottles: 1	Preservative: ICE	Enter Number of Bottles Sent to Lab	<u>1</u>
	W-AHERB-AA				
	W-SUC-AA-R				
	W-UHERB-AA				

Printed: 1/30/2018 10:52:24 AM

Page 1 of 1

Date of Request: 23-JAN-2018
 Created By: PASWATER_B On: 23-JAN-2018
 Modified By: SWANSON_C On: 23-JAN-2018
 Customer: SW-DIST
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District: Southwest District
 Sampling Event: Baker ECOLI #1

Send Coolers To:

Phone: 813-632-7600
 FL Dept. of Environmental Protection
 13051 N. Telecom Parkway
 Temple Terrace, FL 33637-0926
 Attn: Ben Paswater

Send Final Report To:

FL Dept. of Environmental Protection
 13051 N. Telecom Parkway
 Temple Terrace, FL 33637-0926
 Attn: Ben Paswater

Program Module Number:
 Priority: 3
 Event Status: A
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 23-JAN-2018
 Biology Request Reviewed By: SWANSON_C On: 23-JAN-2018
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 29-JAN-2018
 Received By:

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

Comments: Baker ECOLI

Bottle Group A (Water) With 1 Samples:

Bottle Type: QPCR-P-250ML	Number of Bottles: 2	Preserved With: ICE
PCR-FILTER	Template: DEFAULT	(SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis
Bottle Type: SWD-AEL-EC	Number of Bottles: 1	Preserved With: ICE
SWD-AEL-EC	Template: DEFAULT	(EPA 1603) Escherichia coli by membrane filter method using modified mTEC by Advanced Environmental Tampa Lab for SWD
Bottle Type: BG-1L	Number of Bottles: 1	Preserved With: ICE
W-AHERB-AA	Template: DEFAULT	(USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS
W-SUC-AA-R	Template: DEFAULT	(EPA 8321B) Analysis of sucralose in water matrices by HPLC/MS/MS
W-UHERB-AA	Template: DEFAULT	(USGS O-2060-01) Urea herbicides and other chemicals in water matrices by HPLC/MS/MS

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

0491
1000

FedEx Express *Package US Airbill*

FedEx Tracking Number

8115 9551 7333

Form ID No. 0215

Recipient's Copy

1 From

Date

1/24/2018

Sender's Name

Phone

813 470-5700

Company

FDHP

Address

1351 N. Telecom Pkwy

City

Temple Terrace

State

FL

ZIP

33637

2 Your Internal Billing Reference

3 To

Recipient's Name

SAMPLE RECEIVING

Phone

850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 BLAIRSTONE RD

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

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

TALLAHASSEE

State

FL

ZIP

32399

Hold Weekday
FedEx location address
REQUIRED. NOT available for
FedEx First Overnight.

Hold Saturday
FedEx location address
REQUIRED. Available ONLY for
FedEx Priority Overnight and
FedEx 2Day to select locations.

4 Express Package Service

* To most locations.

Packages up to 150 lbs.
For packages over 150 lbs., use the
FedEx Express Freight US Airbill.

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 afternoon.* 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
Package may be left without obtaining a signature for delivery.

☐ Direct Signature
Someone at recipient's address may sign for delivery.

☐ Indirect Signature
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods?

One box must be checked.

- ☒ No ☐ Yes
As per attached Shipper's Declaration.
- ☐ Yes
Shipper's Declaration not required.

☒ Dry Ice
Dry Ice, 9, UN 1845 _____ x _____ kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip. Acct. No. ☐

- ☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages
1

Total Weight

lbs.

Credit Card Auth.



8115 9551 7333

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*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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