



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2019

Data Qualified?

Yes / No

WIN Station Name: Thirtymile Creek @ Train Tracks Mosaic

Date: 02/21/2019

(mm/dd/yyyy)

WIN/ Field ID: G2SW0047

WBID: 1639

Latitude: 27.87472

(Decimal Degrees)

County: Polk

ORG ID: 21FLTPA

Longitude: -82.0457

(Decimal Degrees)

Receiving Body of Water: \_\_\_\_\_

RQ-2019- 02-18-24

| Sampling Team Members                                                        |             |                                                                                                                                                                                                                                        |                  |                 | WQ Measurements                         | Sample Collection                   | Documentation                                               | Preservation                        | Preservation Check                  | Sampling Equipment                                   |                                   |                               |                             |  |
|------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|-----------------------------------------|-------------------------------------|-------------------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------------|-----------------------------------|-------------------------------|-----------------------------|--|
| Ben Paswater<br>Sarah Meyer                                                  |             |                                                                                                                                                                                                                                        |                  |                 | <input checked="" type="checkbox"/>     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/>                         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <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: <u>Secchi #1</u>                       |                                   |                               |                             |  |
| 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>Lil Jon</u>                |                                     |                                                             |                                     |                                     | Matrix: <u>Fresh</u> Marine/ DI                      |                                   |                               |                             |  |
| Photos: Yes / No                                                             |             | Flow: No Flow / Interstitial / <u>Flowing</u> / NA                                                                                                                                                                                     |                  |                 | Tide: Rising/ Falling/ Slack/ <u>NA</u> |                                     |                                                             | Tide Times: High _____ Low _____    |                                     |                                                      |                                   |                               |                             |  |
| Time Zone                                                                    | Time        | Total Depth (m)                                                                                                                                                                                                                        | Sample Depth (m) | Secchi Disk (m) | DO (mg/L)                               | DO (%SAT)                           | pH                                                          | Salinity (PPT)                      | Sp COND (umhos/cm)                  | Temp. (C°)                                           |                                   |                               |                             |  |
| <u>EST</u>                                                                   | <u>0930</u> | <u>0.4</u>                                                                                                                                                                                                                             | <u>0.2</u>       | <u>0.45</u>     | <u>7.29</u>                             | <u>82.6</u>                         | <u>6.77</u><br><u>6.36</u><br><u>SM</u>                     | <u>0.17</u>                         | <u>363</u>                          | <u>21.41</u>                                         |                                   |                               |                             |  |
| 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 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 um 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-CH-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                   |                  |                 |                                         |                                     | <input type="checkbox"/> Ice                                |                                     |                                     |                                                      |                                   |                               |                             |  |
| Physical/Aggregate (Marine)                                                  |             | <input type="checkbox"/> Alkalinity / W-BR-IC / 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 type="checkbox"/> PCR-FILTER <input checked="" type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2<br><input checked="" type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-DG3 <input type="checkbox"/> PCR-GFD |                  |                 |                                         |                                     | <input checked="" type="checkbox"/> Ice                     |                                     |                                     |                                                      |                                   |                               |                             |  |
| Tracers                                                                      |             | <input checked="" type="checkbox"/> W-E8321-DI <input checked="" type="checkbox"/> W-E8321-MS                                                                                                                                          |                  |                 |                                         |                                     | <input checked="" type="checkbox"/> Ice                     |                                     |                                     |                                                      |                                   |                               |                             |  |
| Pesticides                                                                   |             | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-CT-CL-R <input type="checkbox"/> W-E8321-DI<br><input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-E8321-MS <input type="checkbox"/> W-CARB-AA                |                  |                 |                                         |                                     | <input type="checkbox"/> Ice                                |                                     |                                     |                                                      |                                   |                               |                             |  |
| Phytoplankton                                                                |             | <input type="checkbox"/> W-PL-SQ-R                                                                                                                                                                                                     |                  |                 |                                         |                                     | <input type="checkbox"/> Ice                                |                                     |                                     |                                                      |                                   |                               |                             |  |

Place Preservative Sticker(s) Here  
(If Available)

## Notes:

E.coli, T & M

Flow 0.3 m/s J

Signature: Sarah Meyer

Date: 02/21/2019

Field ID/WIN

**G2SW0047**

Site Name: Thirty Mile Creek @ Train Tracks Mosaic

LIMS EVENT ID: 2019-02-22-01

WIN Import ID: 11976

Enter Field Parameters, Verify Station ID In LIMS DMT: SM 03/26/2019

QC Station ID, Field Parameters In LIMS DMT: SM 04/29/2019

Scan/Save Field Sheets SM 07/10/2019

Migrate Data to WIN: SM 04/29/2019

Verify Data In WIN: SM 05/16/2019

(Initials/Date)

(Initials/Date)

(Initials/Date)



Advanced  
Environmental Laboratories, Inc.

☐ **Gainesville:** 4965 SW 41st Blvd. • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639  
☐ **Jacksonville:** 6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9354 • Fax 904.363.9354  
☐ **Tallahassee:** 2639 North Monroe Street, Suite D • Tallahassee, FL 32303 • 904.219.6274 • Fax 850.219.  
☒ **Tampa:** 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327

|                                                                                              |  |                                                                                              |  |                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |
|----------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------------|--|
| Client Name: <b>FDEP SW Dist.</b>                                                            |  | Project Name: <b>SMP</b>                                                                     |  | BOTTLE SIZE & TYPE<br><br>Analysis Required<br><br><b>E. COLI</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | LABORATORY I.D. |  |
| Address: <b>13051 N. Telecom Pkwy, Temple Terrace FL 33637</b>                               |  | P.O. Number: <b>B370AE</b>                                                                   |  |                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |
| Phone: <b>813-470-5770</b>                                                                   |  | Project Address:                                                                             |  |                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |
| Contact: <b>Judy Ashton 813-470-5772</b>                                                     |  | Special Instructions:<br><b>RQ-2019-02-18-24</b>                                             |  |                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |
| Sampled By:                                                                                  |  |                                                                                              |  |                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |
| Turn Around Time: <input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RUSH |  | <input type="checkbox"/> ADAPT <input type="checkbox"/> EQUIS <input type="checkbox"/> Other |  |                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |
| Page:      of                                                                                |  |                                                                                              |  |                                                                   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |

  

| SAMPLE ID                           | SAMPLE DESCRIPTION                                       | Lab<br>Comp | SAMPLING       |             | MATRIX    | NO.<br>COUNT | PRE<br>SER. | VAT | CN | 100 | 1000 | 10000 | 100000 | 1000000 | 10000000 | 100000000 | 1000000000 | 10000000000 | 100000000000 | 1000000000000 |
|-------------------------------------|----------------------------------------------------------|-------------|----------------|-------------|-----------|--------------|-------------|-----|----|-----|------|-------|--------|---------|----------|-----------|------------|-------------|--------------|---------------|
|                                     |                                                          |             | DATE           | TIME        |           |              |             |     |    |     |      |       |        |         |          |           |            |             |              |               |
| Field ID/WIN<br><b>G2SW0045</b><br> | Site Name: <b>Alafia River @ Center Ave</b>              |             | <b>2/21/19</b> | <b>1110</b> | <b>SW</b> | <b>1</b>     |             |     |    |     |      |       |        |         |          |           |            |             |              |               |
| Field ID/WIN<br><b>G2SW0091</b><br> | Site Name: <b>Alafia R. @ Boat Ramp Dock</b>             |             | <b>2/21/19</b> | <b>1145</b> | <b>SW</b> | <b>1</b>     |             |     |    |     |      |       |        |         |          |           |            |             |              |               |
| Field ID/WIN<br><b>G2SW0047</b><br> | Site Name: <b>Thirtymile Creek @ Train Tracks Mosaic</b> |             | <b>2/21/19</b> | <b>0930</b> | <b>SW</b> | <b>1</b>     |             |     |    |     |      |       |        |         |          |           |            |             |              |               |
| Field ID/WIN<br><b>G2SW0046</b><br> | Site Name: <b>Thirtymile Creek @ Nichols Rd.</b>         |             | <b>2/21/19</b> | <b>1000</b> | <b>SW</b> | <b>1</b>     |             |     |    |     |      |       |        |         |          |           |            |             |              |               |
| Field ID/WIN<br><b>G2SW0093</b><br> | Site Name: <b>McDonald Branch @ Thompson Rd</b>          |             | <b>2/21/19</b> | <b>1030</b> | <b>SW</b> | <b>1</b>     |             |     |    |     |      |       |        |         |          |           |            |             |              |               |

|                                                                                                                                                                                                                                                                                  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 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                                                                                                                                                                                                                                         |  |
| Relinquished by: <b>2/21/19 12:28</b> Received by: <b>2-21-19 1230</b>                                                                                                                                                                                                           |  |
| Device used for measuring Temp by unique identifier (circle IR temp gun used)    J: 9A    G: LT-2    T: 10A    A: 3A    M: 3A    S: 1V                                                                                                                                           |  |
| PWS ID: _____                                                                                                                                                                                                                                                                    |  |

**FOR DRINKING WATER USE:**

Request Number: RQ-2019-02-18-24

SMP - Alafia, Alafia, 30 Mile, and McDonalds

# Florida Department of Environmental Protection

## Central Laboratory Submittal Form

Page 1 of 2

last revised Jan 25, 2018

Customer: SW-DIST

Project ID: SMP

Requester: Benjamin Paswater

Field Report Prepared By: S Meyer

Collected By: B Paswater &amp; S Meyer

Sampling Agency: DEP SW ROC

|          |                                                             |          |                                                                           |                                                              |                     |                                                                            |                                    |                                  |
|----------|-------------------------------------------------------------|----------|---------------------------------------------------------------------------|--------------------------------------------------------------|---------------------|----------------------------------------------------------------------------|------------------------------------|----------------------------------|
| Location | Field ID/WIN                                                | G2SW0045 | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 2/21/19 Time 1110    | Eastern<br>Central  | Composited<br>Date                                                         | End<br>Time                        | Bottle<br>Group(s)<br>(See pg 2) |
| Field ID |                                                             |          | Matrix (type, e.g., Salt, Fresh, etc)                                     |                                                              | Diss. Oxygen        | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)      | A                                |
| WIN/STO  | Site Name: Alafia River @ Center Ave                        |          | Temp<br>(C) 22.65                                                         | pH 6.71                                                      | Sample<br>Depth 0.3 | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m       | Sp. Conductance<br>(umho/cm) 484   |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |          | Salinity<br>(ppt)                                                         | Comments                                                     |                     |                                                                            |                                    |                                  |
| Location | Field ID/WIN                                                | G2SW0091 | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 2/21/19 Time 1145    | Eastern<br>Central  | Composited<br>Date                                                         | End<br>Time                        | Bottle<br>Group(s)               |
| Field ID |                                                             |          | Matrix (type, e.g., Salt, Fresh, etc)                                     |                                                              | Diss. Oxygen        | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)      | B                                |
| WIN/STO  | Site Name: Alafia R. @ Boat Ramp Dock                       |          | Temp<br>(C) 24.27                                                         | pH 7.20                                                      | Sample<br>Depth 0.3 | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m       | Sp. Conductance<br>(umho/cm) 19785 |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |          | Salinity<br>(ppt)                                                         | Comments Salty                                               |                     |                                                                            |                                    |                                  |
| Location | Field ID/WIN                                                | G2SW0047 | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 02/21/2019 Time 0930 | Eastern<br>Central  | Composited<br>Date                                                         | End<br>Time                        | Bottle<br>Group(s)               |
| Field ID |                                                             |          | Matrix (type, e.g., Salt, Fresh, etc)                                     |                                                              | Diss. Oxygen        | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)      | B                                |
| WIN/STO  | Site Name: Thirtymile Creek @ Train Tracks Mosiac           |          | Temp<br>(C) 21.41                                                         | pH 6.77                                                      | Sample<br>Depth 0.2 | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m       | Sp. Conductance<br>(umho/cm) 363   |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |          | Salinity<br>(ppt) 0.17                                                    | Comments                                                     |                     |                                                                            |                                    |                                  |
| Location | Field ID/WIN                                                | G2SW0046 | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 02/21/2019 Time 1000 | Eastern<br>Central  | Composited<br>Date                                                         | End<br>Time                        | Bottle<br>Group(s)               |
| Field ID |                                                             |          | Matrix (type, e.g., Salt, Fresh, etc)                                     |                                                              | Diss. Oxygen        | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)      | B                                |
| WIN/STO  | Site Name: Thirtymile Creek @ Nichols Rd.                   |          | Temp<br>(C) 21.36                                                         | pH 6.41                                                      | Sample<br>Depth 0.3 | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m       | Sp. Conductance<br>(umho/cm) 352   |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |          | Salinity<br>(ppt) 0.17                                                    | Comments                                                     |                     |                                                                            |                                    |                                  |

|                  |                         |                        |                              |              |            |
|------------------|-------------------------|------------------------|------------------------------|--------------|------------|
| Relinquished By: | Date/Time: 2/21/19 1700 | Shipping Method: FedEx | Number of Coolers Shipped: 1 | Received By: | Date/Time: |
|------------------|-------------------------|------------------------|------------------------------|--------------|------------|

Request Number: RQ-2019-02-18-24

SMP - Alafia, Alafia, 30 Mile, and McDonalds

# Florida Department of Environmental Protection Central Laboratory Submittal Form

 Page 1 of 2  
last revised Jan 25, 2018

Customer: SW-DIST

Project ID: SMP

Requester: Benjamin Paswater

Collected By: B Paswater &amp; S Meyer

Field Report Prepared By: S Meyer

Sampling Agency: DEP SW ROC

|                                          |  |                                                                        |  |                                 |  |                                                                                        |  |                                                                   |  |                           |  |                 |  |
|------------------------------------------|--|------------------------------------------------------------------------|--|---------------------------------|--|----------------------------------------------------------------------------------------|--|-------------------------------------------------------------------|--|---------------------------|--|-----------------|--|
| Location                                 |  | <input type="checkbox"/> Comp <input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab) |  | Eastern <input checked="" type="checkbox"/> Central <input type="checkbox"/> Composite |  | Date                                                              |  | Time                      |  | Bottle Group(s) |  |
| Field ID/WIN                             |  | G2SW0093                                                               |  | Date                            |  | 02/21/19                                                                               |  | Time                                                              |  | 10:30                     |  | (See pg 2)      |  |
| Field I                                  |  | Matrix (type, e.g., Salt, Fresh, etc)                                  |  | Diss. Oxygen                    |  | <input checked="" type="checkbox"/> mg/L <input type="checkbox"/> % sat                |  | Total Res. Chlorine                                               |  | (mg/L)                    |  |                 |  |
| WIN/S                                    |  | Temp (C)                                                               |  | pH                              |  | Sample Depth                                                                           |  | <input type="checkbox"/> ft <input checked="" type="checkbox"/> m |  | Sp. Conductance (umho/cm) |  | 224             |  |
| Site Name: McDonald Branch @ Thompson Rd |  | Salinity (ppt)                                                         |  | Comments                        |  | 0.11                                                                                   |  | E. COLI ONLY - TO AEL                                             |  |                           |  |                 |  |
| Latitude                                 |  | <input type="checkbox"/> dd <input type="checkbox"/> dms               |  | Longitude                       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms                               |  |                                                                   |  |                           |  |                 |  |

|                |  |                                                                        |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |
|----------------|--|------------------------------------------------------------------------|--|---------------------------------|--|-----------------------------------------------------------------------------|--|--------------------------------------------------------|--|---------------------------|--|-----------------|--|
| Location       |  | <input type="checkbox"/> Comp <input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab) |  | Eastern <input type="checkbox"/> Central <input type="checkbox"/> Composite |  | Date                                                   |  | Time                      |  | Bottle Group(s) |  |
| Field ID       |  | Matrix (type, e.g., Salt, Fresh, etc)                                  |  | Diss. Oxygen                    |  | <input type="checkbox"/> mg/L <input type="checkbox"/> % sat                |  | Total Res. Chlorine                                    |  | (mg/L)                    |  |                 |  |
| WIN/STORET #   |  | Temp (C)                                                               |  | pH                              |  | Sample Depth                                                                |  | <input type="checkbox"/> ft <input type="checkbox"/> m |  | Sp. Conductance (umho/cm) |  |                 |  |
| Latitude       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms               |  | Longitude                       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms                    |  |                                                        |  |                           |  |                 |  |
| Salinity (ppt) |  | Comments                                                               |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |

|                |  |                                                                        |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |
|----------------|--|------------------------------------------------------------------------|--|---------------------------------|--|-----------------------------------------------------------------------------|--|--------------------------------------------------------|--|---------------------------|--|-----------------|--|
| Location       |  | <input type="checkbox"/> Comp <input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab) |  | Eastern <input type="checkbox"/> Central <input type="checkbox"/> Composite |  | Date                                                   |  | Time                      |  | Bottle Group(s) |  |
| Field ID       |  | Matrix (type, e.g., Salt, Fresh, etc)                                  |  | Diss. Oxygen                    |  | <input type="checkbox"/> mg/L <input type="checkbox"/> % sat                |  | Total Res. Chlorine                                    |  | (mg/L)                    |  |                 |  |
| WIN/STORET #   |  | Temp (C)                                                               |  | pH                              |  | Sample Depth                                                                |  | <input type="checkbox"/> ft <input type="checkbox"/> m |  | Sp. Conductance (umho/cm) |  |                 |  |
| Latitude       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms               |  | Longitude                       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms                    |  |                                                        |  |                           |  |                 |  |
| Salinity (ppt) |  | Comments                                                               |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |

|                |  |                                                                        |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |
|----------------|--|------------------------------------------------------------------------|--|---------------------------------|--|-----------------------------------------------------------------------------|--|--------------------------------------------------------|--|---------------------------|--|-----------------|--|
| Location       |  | <input type="checkbox"/> Comp <input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab) |  | Eastern <input type="checkbox"/> Central <input type="checkbox"/> Composite |  | Date                                                   |  | Time                      |  | Bottle Group(s) |  |
| Field ID       |  | Matrix (type, e.g., Salt, Fresh, etc)                                  |  | Diss. Oxygen                    |  | <input type="checkbox"/> mg/L <input type="checkbox"/> % sat                |  | Total Res. Chlorine                                    |  | (mg/L)                    |  |                 |  |
| WIN/STORET #   |  | Temp (C)                                                               |  | pH                              |  | Sample Depth                                                                |  | <input type="checkbox"/> ft <input type="checkbox"/> m |  | Sp. Conductance (umho/cm) |  |                 |  |
| Latitude       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms               |  | Longitude                       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms                    |  |                                                        |  |                           |  |                 |  |
| Salinity (ppt) |  | Comments                                                               |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |

|                |  |                                                                        |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |
|----------------|--|------------------------------------------------------------------------|--|---------------------------------|--|-----------------------------------------------------------------------------|--|--------------------------------------------------------|--|---------------------------|--|-----------------|--|
| Location       |  | <input type="checkbox"/> Comp <input checked="" type="checkbox"/> Grab |  | Collection (comp begin or grab) |  | Eastern <input type="checkbox"/> Central <input type="checkbox"/> Composite |  | Date                                                   |  | Time                      |  | Bottle Group(s) |  |
| Field ID       |  | Matrix (type, e.g., Salt, Fresh, etc)                                  |  | Diss. Oxygen                    |  | <input type="checkbox"/> mg/L <input type="checkbox"/> % sat                |  | Total Res. Chlorine                                    |  | (mg/L)                    |  |                 |  |
| WIN/STORET #   |  | Temp (C)                                                               |  | pH                              |  | Sample Depth                                                                |  | <input type="checkbox"/> ft <input type="checkbox"/> m |  | Sp. Conductance (umho/cm) |  |                 |  |
| Latitude       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms               |  | Longitude                       |  | <input type="checkbox"/> dd <input type="checkbox"/> dms                    |  |                                                        |  |                           |  |                 |  |
| Salinity (ppt) |  | Comments                                                               |  |                                 |  |                                                                             |  |                                                        |  |                           |  |                 |  |

|                              |                           |                        |                              |              |            |
|------------------------------|---------------------------|------------------------|------------------------------|--------------|------------|
| Relinquished By: Sarah Meyer | Date/Time: 2/21/2019 1700 | Shipping Method: FedEx | Number of Coolers Shipped: 1 | Received By: | Date/Time: |
|------------------------------|---------------------------|------------------------|------------------------------|--------------|------------|

Group A W-E8321-DI BG-500ML  
W-E8321-MS

# SENT 1

|          |                                         |                |                 |                   |                                     |   |
|----------|-----------------------------------------|----------------|-----------------|-------------------|-------------------------------------|---|
| Group: A | Bottle Type<br>PCR-FILTER               | QPCR-P-500ML   | # of Bottles: 1 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 1 |
| Group: A | Bottle Type<br>SWD-AEL-EC               | P-250ML-WI-THI | # of Bottles: 1 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 2 |
| Group: B | Bottle Type<br>PCR-BACR<br>PCR-HF183    | QPCR-P-500ML   | # of Bottles: 4 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 3 |
| Group: B | Bottle Type<br>SWD-AEL-EC               | P-250ML-WI-THI | # of Bottles: 4 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 3 |
| Group: B | Bottle Type<br>W-E8321-DI<br>W-E8321-MS | BG-500ML       | # of Bottles: 4 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 3 |