



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2020

Meter Passed End
of Day CCV
Yes / No

WIN Station Name: Ross Lake Center

Date: 08/04/2020

(mm/dd/yyyy)

WIN/ Field ID: 20030454

WBID: 2543F

Latitude: 29.7010

(Decimal Degrees)

County: Putnam

ORG ID: 21FLA

Longitude: -81.9963

(Decimal Degrees)

Receiving Body of Water:

RQ-2020-03-02-25

04-20-30

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
K. Appleby	X	X	X	X	X
J. Parrish	X	X	X	X	X

Sampling Equipment	
☒ Sample Container	☐ Van Dorn
☐ Syringe	☐ Pole
☐ Dipper	☐ Other
Depth Measured with <u>Stitch</u>	
Equipment ID <u>on the K.P. #7</u>	
Collection Method	
☐ Wading	☒ Canoe/Kayak
☐ From Shore	☐ Electric Motor
☐ Other	☐ Gasoline Motor

Water Level: Dry/ Pooled/ Low / Normal / <u>High</u> / Flooded		Meter ID# <u>Stitch</u>	
Photos: Yes ☒ No ☐	Flow: No Flow / Flowing / <u>NA</u>	Tide: Rising/ Falling/ Slack/ <u>NA</u>	Tide Times: High <u>—</u> Low <u>—</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#:
Notes:			

Duplicate Sample

Time Zone: EST CEN Time: _____	Field ID: _____ (WIN ID_DUP)
WIN DMT Activity ID: _____	

Blank

Time Zone: EST CEN Time: _____	Field ID: _____ (Blank Type_DDDMMYYY)
DI Source: _____	Location: _____
☐ Field Blank ☐ Equipment Blank ☐ Field Cleaned Equipment Blank	Equipment ID: _____

LIMS EVENT ID: _____	WIN Import ID: _____
Enter Field Parameters, Verify Station ID in LIMS DMT: _____ (Initials/Date)	QC Station ID, Field Parameters in LIMS DMT: _____ (Initials/Date)
Scan/Save Field Sheets _____ (Initials/Date)	Migrate Data to WIN: _____ (Initials/Date)
Verify Data in WIN: _____ (Initials/Date)	



**MCAA: Monochloroacetic acid buffer solution