

# Login Checklist

RQ-2020-12-07-40

Login Station ID: #4

Shipping Method: FedEx UPS | HD | Greyhound

Date/Time of Receipt: 12/09/2020 @ 9:35

| *Cooler Temperature | Samples Frozen? | * All Samples in Cooler Preserved with |          | Number of Sample Containers in Cooler | Evidence Tape |    |          |    | Waybill Tracking # |
|---------------------|-----------------|----------------------------------------|----------|---------------------------------------|---------------|----|----------|----|--------------------|
|                     |                 |                                        |          |                                       | Present?      |    | *Intact? |    |                    |
|                     | YES             | HNO <sub>3</sub>                       | Formalin |                                       | Yes           | No | Yes      | No |                    |
| 0.5°C               |                 |                                        |          | TR 149                                |               | X  |          |    | 9293 8007 4230     |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |
|                     |                 |                                        |          |                                       |               |    |          |    |                    |

## COOLER CHECK

\*All samples received on ice unless otherwise noted. HNO3 and Formalin preserved samples do NOT have a temperature requirement.

- If the temperature of a cooler exceeds 6.0 °C (above 10.0 °C for W-1-4-DIOX and microbiology) or received without ice, identify affected samples in an NCR. NCR# \_\_\_\_\_
- DOH coolers can exceed 2.0 °C above the standard temperature (6.0 or 10.0 °C for W-1-4-DIOX) without login confirmation from customer for samples requiring ice preservation; identify affected samples in an NCR. NCR# \_\_\_\_\_
- If cooler or samples are received with a damaged Evidence Seal; identify the affected samples in an NCR. NCR# \_\_\_\_\_
- If coolers or samples are received late; identify the affected samples in an NCR. NCR# \_\_\_\_\_

Chain of Custody/ Field Sheet(s) Included?

Yes ☒ No ☐

Micro-Biology Overflow Chain of Custody/ Field Sheet(s) Included?

Yes ☐ No ☐

## CONTAINER CHECK

Evidence Tape on Bottles?

Yes ☐ No ☐ NA ☒

Evidence Tape intact? Yes ☐ No ☐

If Criminal, photographs taken?

Yes ☐ No ☐

Containers intact? Yes ☒ No ☐

Caps on tight?

Yes ☒ No ☐

Sufficient Sample Volume:

Yes ☒ No ☐

If **NO** is checked above, generate an NCR listing affected sample IDs in its appropriate category. NCR# \_\_\_\_\_

**CHLORINE CHECK REQUIRED?** (Blue dot on container)

Yes ☒ No ☐ Init: Tyler

Chlorine detected? (One container checked per Field ID)

Yes ☐ No ☒ Init: Tyler

If chlorine is detected, generate an NCR listing affected sample IDs . NCR# \_\_\_\_\_

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

\*\*Acid Preserved Samples: pH < 2.0?

Yes ☒ No ☐ NA ☐ Init: Tyler

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

If samples were not preserved correctly, generate an NCR listing affected sample IDs . NCR# \_\_\_\_\_

Coolers Unpacked/Checked by: Tyler Reynolds

Date: 12/09/2020

Event contains NCRs (Y/N)? None

Event ID: \_\_\_\_\_

Little St. Marys, Alligator SCI  
NE-DIST-2020-12-09-01 (SMP)

## Login Checklist

Login Preservation Equipment

Lot # & Exp: Date

Additional Comments:

|                          |                            |
|--------------------------|----------------------------|
| Infrared Thermometer ID: | #4 Temp Gun EXP:10/28/2021 |
| pH Test Strips 0 – 6     | N/A                        |
| pH Paper 0 – 3           | N/A                        |
| pH Paper 0 – 13          | 231019 EXP:11/01/2022      |
| Chlorine Test Strips     | 8261 EXP:07/2021           |

### ENCORE SAMPLES

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

Were Encore samples received? Yes \_\_\_\_\_ Init: \_\_\_\_\_

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 \_\_\_\_\_

If S-VOC-MS samples were not preserved correctly, generate an NCR listing affected sample IDs . NCR# \_\_\_\_\_

**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: \_\_\_\_\_



RQ-2020-12-07-40

Customer: WQAP

Project ID: SMP

Collected By: Kelly McDonald, Kimberly Applebee

Field Report Prepared By: Kelly McDonald

Sampling Agency: FDEP

Place Label Here

WIN ID/Field ID:



G4NE0280

Location: Alligator Cr At Hobbs Landing

Comments: Microbiology sample(s) submitted to contract laboratory

Nutrients and Metals preserved on ice until back at lab, then preserved with acid and pH checked and put on ice to be sent out.

Matrix: Fresh

(Check one)

☒ GRAB☐ COMPOSITE

| Date      | Time        | DO (mg/L) | DO (%SAT) | Temp. (C°) | pH   | Sample Depth (m) | Secchi Disk (m)                         | Total Depth (m) | Sp COND (µmhos/cm) | Salinity (PPTH) |
|-----------|-------------|-----------|-----------|------------|------|------------------|-----------------------------------------|-----------------|--------------------|-----------------|
| 12/8/2020 | 1350<br>EST | 6.59      | 63.6      | 13.7       | 6.85 | 0.3              | 0.5<br><input type="checkbox"/> VOB (S) | 1.399           | 267.1              | 0.13            |

Central Lab please use top row for login purposes

|     |  |  |  |  |  |  |  |  |  |  |
|-----|--|--|--|--|--|--|--|--|--|--|
| EST |  |  |  |  |  |  |  |  |  |  |
|-----|--|--|--|--|--|--|--|--|--|--|

| Parameter Suite                    | Parameter Methods                                                                                                                                                                                                                                                  | Preservation                                                                       | pH Check                               | # Bottles sent to Lab | Bottle Group |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------|-----------------------|--------------|
| Preserved Nutrients (P-500ML)      | <input checked="" type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP<br>Lot # Sa0038110 Exp: 02.07.21                                                                                                                                                   | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4* | <input checked="" type="checkbox"/> <2 | 1                     | A            |
| Metals (P-500ML)                   | <input checked="" type="checkbox"/> W-ICPMS <input checked="" type="checkbox"/> W-ICP <input checked="" type="checkbox"/> W-HARD<br>Lot # Na9354060 Exp: 12.20.20                                                                                                  | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> HNO3*  | <input checked="" type="checkbox"/> <2 | 1                     | A            |
| Filtered Nutrients (P125ML)        | <input checked="" type="checkbox"/> W-PO4-F <input checked="" type="checkbox"/> Field Filtered 0.45 µm Filter<br>Filter Lot #<br>Syringe Lot # 9240133                                                                                                             | <input checked="" type="checkbox"/> Ice                                            |                                        | 1                     | A            |
| Chlorophyll (BP-1L)                | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> Ice                                            |                                        | 1                     | A            |
| Physical/Aggregate (Fresh) (P-1L)  | <input checked="" type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CL-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                    | <input checked="" type="checkbox"/> Ice                                            |                                        | 1                     | A            |
| Physical/Aggregate (Marine) (P-1L) | <input type="checkbox"/> Alkalinity / W-BR-IC / W-F / W-TSS / TURBIDITY                                                                                                                                                                                            | <input type="checkbox"/> Ice                                                       |                                        |                       |              |
| Macroinvertebrates (PJ-2L)         | <input type="checkbox"/> MI-FW-QLDC                                                                                                                                                                                                                                | <input type="checkbox"/> Formalin                                                  |                                        |                       |              |
| Periphyton (PT-50ML)               | <input type="checkbox"/> ALGAE-ID                                                                                                                                                                                                                                  | <input type="checkbox"/> Ice                                                       |                                        |                       |              |
| Microbiology (Contract Lab Bottle) | <input checked="" type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci<br><input checked="" type="checkbox"/> Contract Lab                                                                                                | <input checked="" type="checkbox"/> Ice                                            |                                        | 1                     | A            |
| Molecular (QPCR-P-500ML)           | <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-DG3<br><input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR-GFD <input type="checkbox"/>                                                              | <input type="checkbox"/> Ice                                                       |                                        |                       |              |
| Tracers (BG-500ML)                 | <input checked="" type="checkbox"/> W-E8321-DI <input checked="" type="checkbox"/> W-E8321-MS                                                                                                                                                                      | <input checked="" type="checkbox"/> Ice                                            |                                        | 1                     | A            |
| Pesticides (BG-500ML) (BG-1L)      | <input type="checkbox"/> W-E8321-DI <input type="checkbox"/> WE8321-MS <input checked="" type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-CT-CL-R<br><input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-CARB-AA (5 ml of MCAA** Buffer Solution) | <input type="checkbox"/> Ice                                                       |                                        | 4                     | A            |
|                                    |                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Ice                                                       |                                        |                       |              |

Name:  
Kelly McDonald  
Kimberly Applebee

Signature:

Kelly A McDonald

Date:

12/8/2020

\*2.0 ml of Preservative used unless noted otherwise.

\*\*MCAA: Monochloroacetic acid buffer solution



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2020

Meter Passed End  
of Day CCV  
☒ Yes / ☐ No

WIN Station Name: Alligator Cr At Hobbs Landing

Date: 12/8/2020

WIN/Field ID: G4NE0280

WBID: 2153

ENR:

Latitude: 30.5806

County: NASSAU

Org ID: 21FLA

Longitude: -81.7024

Receiving Body of Water: Nassau - St. Marys

RQ- 2020-12-07-40

| Sampling Team Members               |                   | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-------------------------------------|-------------------|-----------------|-------------------|---------------|--------------|--------------------|
| <input checked="" type="checkbox"/> | Kelly McDonald    | x               |                   | x             |              | x                  |
| <input checked="" type="checkbox"/> | Kimberly Applebee |                 | x                 |               | x            | x                  |
| <input type="checkbox"/>            |                   |                 |                   |               |              |                    |
| <input type="checkbox"/>            |                   |                 |                   |               |              |                    |

| Sampling Equipment                                   |                                          |
|------------------------------------------------------|------------------------------------------|
| <input checked="" type="checkbox"/> Sample Container | <input type="checkbox"/> Carboy          |
| <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Van Dorn        |
| <input type="checkbox"/> Syringe                     | <input checked="" type="checkbox"/> Pole |
| Depth measured with: Meter                           |                                          |
| Secchi Equipment ID:                                 |                                          |
| Collection Method                                    |                                          |
| <input type="checkbox"/> Wading                      | <input type="checkbox"/> Canoe/Kayak     |
| <input checked="" type="checkbox"/> From Shore       | <input type="checkbox"/> Electric Motor  |
| <input type="checkbox"/> Other                       | <input type="checkbox"/> Gasoline Motor  |

|                                                                                                                                                                                                                                                                 |            |                |                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------|----------------------------------|
| Water Level: <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Low <input type="checkbox"/> High <input type="checkbox"/> Dry <input type="checkbox"/> Pooled <input type="checkbox"/> Flooded                                                |            | Meter ID# DESI |                                  |
| Photos: YES                                                                                                                                                                                                                                                     | Flow: FLOW | Tide: RISING   | Tide Times: High: 1808 Low: 1209 |
| Biological Samples Collected: <input checked="" type="checkbox"/> None <input type="checkbox"/> HA <input type="checkbox"/> SCI <input type="checkbox"/> RPS <input type="checkbox"/> Algae ID <input type="checkbox"/> LVS <input type="checkbox"/> LVI Other: |            |                |                                  |
| SBIO ID Numbers:                                                                                                                                                                                                                                                |            |                |                                  |
| Notes:                                                                                                                                                                                                                                                          |            |                |                                  |

## Duplicate Sample

|                      |           |               |              |
|----------------------|-----------|---------------|--------------|
| Time Zone: EST       | Time: N/A | Field ID: N/A | (WIN ID_DUP) |
| WIN DMT Activity ID: |           |               |              |

## Blank

|                |                   |               |                      |
|----------------|-------------------|---------------|----------------------|
| Time Zone:     | Time: N/A         | Field ID: N/A | (Blank Type_DDMYYYY) |
| DI Source: N/A | Location: N/A     |               |                      |
| DI Type: N/A   | Equipment ID: N/A |               |                      |

|                                                                        |                                                              |
|------------------------------------------------------------------------|--------------------------------------------------------------|
| 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)                          |

# CALIBRATION AND VERIFICATION LOG (FDEP SOP FT 1000-FT 1500, FD 1000-FD 4000)

Boldly "X" this box if there are qualified data on this page.

Meter ID: Des RQ- 2020-12-07-40 Project: Alligator Cr

Notes: (1) Always wait for meter to stabilize before recording any readings.  
 (2) Report all digits displayed. Do not round before reporting measurements. (See special instructions for depth).  
 (3) For Calibrations, record calibrated meter reading. Do not record initial meter reading before calibration.

Date of Last Temperature Verification 10/14/20

Temperature (Quarterly) FT 1400

| DO DEP SOP FT 1500 | Name       | Date    | Time CT-ET | Temp °C | Baro-meter mmHg | D.O. Chart mg/L | Meter D.O. mg/L | % DO  | Probe Charge | Probe Gain | Pass / Fail | Lab / Field |
|--------------------|------------|---------|------------|---------|-----------------|-----------------|-----------------|-------|--------------|------------|-------------|-------------|
| Calibr.            | K. Appleby | 12/8/20 | 1023       | 19.9    | 76.56           | 9.2             | 9.24            | 100.5 | -            | 106551     | (P/F)       | (L/F)       |
| ICV                | ↓          | ↓       | 1025       | 20.1    | 76.31           | 9.1             | 9.13            | 100.6 | -            | 106551     | (P/F)       | (L/F)       |
| CCV                | ↓          | ↓       | 1608       | 17.8    | 76.15           |                 | 8.96            | 99.2  | -            | 106353     | (P/F)       | (L/F)       |
| CCV                |            |         |            | 20.4    |                 |                 |                 |       |              |            | P/F         | L/F         |

DO Acceptance criteria from Table  $\pm 0.3$  mg/L.  
 Optical: DO gain range 0.85 to 1.15 (Pro DSS 0.75 to 1.50); DO charge N/A. Steady-state & Galvanic Sensors: DO Gain & Charge N/A.

| Spec. Cond. FT 1200 | Name       | Date    | Time CT-ET | Lot #   | Expir. Date | Standard $\mu$ mhos/cm | Meter Reading $\mu$ mhos/cm | Pass / Fail | Lab / Field |
|---------------------|------------|---------|------------|---------|-------------|------------------------|-----------------------------|-------------|-------------|
| Calibr.             | K. Appleby | 12/8/20 | 1027       | 200902B | 9/2/21      | 1000                   | 1000                        | (P/F)       | (L/F)       |
| ICV                 | ↓          | ↓       | 1029       | 200902A | 9/2/21      | 100                    | 1050                        | (P/F)       | (L/F)       |
| CCV                 | ↓          | ↓       | 1610       | 200902C | 9/2/21      | 1413                   | 1409                        | (P/F)       | (L/F)       |
| CCV                 |            |         |            |         |             |                        |                             | P/F         | L/F         |

Conductivity Acceptance criteria  $\pm 5\%$

| pH DEP SOP FT 1100 | Name       | Date    | Time CT-ET | Lot #    | Expir. Date | pH Buffer SU | Temp °C | Meter reading SU | mV     | Pass / Fail | Lab / Field |
|--------------------|------------|---------|------------|----------|-------------|--------------|---------|------------------|--------|-------------|-------------|
| Calibr.            | K. Appleby | 12/8/20 | 1030       | 20061631 | 1/2022      | 7.00         | 21.3    | 7.00             | -27.2  | (P/F)       | (L/F)       |
| Calibr.            |            |         | 1035       | 2006306  | 5/2022      | 4.00         | 21.3    | 4.00             | +51.0  | (P/F)       | (L/F)       |
| Calibr.            |            |         | 1037       | 2002911  | 8/2022      | 10.00        | 21.5    | 10.00            | -197.3 | (P/F)       | (L/F)       |
| ICV                | ↓          | ↓       | 1039       | 20061631 | 1/2022      | 7.00         | 21.3    | 7.00             | -27.2  | (P/F)       | (L/F)       |
| CCV                | ↓          | ↓       | 1612       | 2006306  | 5/2022      | 4.00         | 21.8    | 4.02             | 177.9  | (P/F)       | (L/F)       |
| CCV                |            |         |            |          |             |              |         | 4.05             |        | P/F         | L/F         |

pH Acceptance criteria  $\pm 0.2$  SU; mV pH 7 Range 0  $\pm$  50; mV pH 4 Range +180  $\pm$  50; mV pH 10 Range -180  $\pm$  50;  
 If mV are recorded: slope from 7 to 10 \_\_\_\_\_, slope from 4 to 7 \_\_\_\_\_ (both must be between 165 and 180 mV)

Does meter have a depth sensor that will be used to measure total depth & sample depth? YES / NO / NA (not surf. water project)  
 If YES, complete daily Calibr. & ICV below and list date of last quarterly depth verification: 10/14/20  
 If NO, what will be used? (circle one) Secchi Disk Line / Sonar Unique ID: \_\_\_\_\_; Date of last verification: \_\_\_\_\_

| Depth Sensor (Daily Calibration & ICV) | Name       | Date    | Time CT-ET | Calibrated Value (0.00 or Offset), meters | ICV Value, meters | Pass / Fail | Lab / Field |
|----------------------------------------|------------|---------|------------|-------------------------------------------|-------------------|-------------|-------------|
| Pressure mode in air                   | K. Appleby | 12/8/20 | 1045       | 0.00                                      | 0.00              | (P/F)       | (L/F)       |

Report two decimal places. Round numbers  $\leq 4$  down,  $\geq 5$  up. ICV acceptance criteria  $\pm 5\%$  or  $\pm 0.05$ m, whichever is greater.

COMMENTS:

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
CHAIN OF CUSTODY FORM

**Date:** 12/8/2020 **Collected By:** Kelly McDonald, Kimberly Applebee  
**Customer:** NE-DIST **Sampling Agency:** FDEP  
**RQ:** RQ-2020-12-07-40 **Project ID:** SMP

PLEASE RETURN THE ORIGINAL OF THIS FORM WITH SAMPLE SUBMITTAL  
FORMS AND THE COOLER PACKING WORKSHEET TO THE LAB

**Number of Coolers Shipped:** 1

**FIELD ID (Labels) submitted under this RQ for this collection date.**

| Site Location                 | Field ID/WIN ID                                                                                |
|-------------------------------|------------------------------------------------------------------------------------------------|
| Alligator Cr At Hobbs Landing | <br>G4NE0280 |

RELINQUISHED BY(SIGNATURE): Kelly A McDonald

DATE/TIME: 12/8/2020 1600

**THIS SECTION TO BE COMPLETED BY LABORATORY**

Rec'd/Inspected By: Tyler Reynolds

Rec'd/Inspected Date: 12/09/2020



# CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

SR #  
ALS Contact

9143 Phillips Highway, Suite 200, Jacksonville, FL 32256  
Phone (904) 739-2277 / 800-695-7222 x06 / FAX (904) 739-2011

Page

www.alsglobal.com

| Project Name                           |        | Report Number          |      | ANALYSIS REQUESTED (Include Method Number and Container Preservative) |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
|----------------------------------------|--------|------------------------|------|-----------------------------------------------------------------------|---|------------------|--|--------------------------------------|--|------------------|--|-----------------|--|------------------|--|--|--|
| Alligator Crk                          |        | 2020-12-07-40          |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| Report To                              |        | Report CC              |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| Company/Address                        |        | FAX #                  |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| FL DEP DEAR NERDC                      |        |                        |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| 8800 Baymeadows Way West               |        |                        |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| Phone #                                |        | Sampler's Printed Name |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| 904-256-1700                           |        | Kelly McDonald         |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| Sampler's Signature                    |        | Kelly McDonald         |      |                                                                       |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| CLIENT SAMPLE ID                       | LAB ID | SAMPLING DATE TIME     |      | Matrix                                                                |   |                  |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| G4NE0280                               |        | 12/8                   | 1350 | SW                                                                    | 1 | X                |  |                                      |  |                  |  |                 |  |                  |  |  |  |
| Special Instructions/Comments:         |        |                        |      | TURNAROUND REQUIREMENTS                                               |   |                  |  | REPORT REQUIREMENTS                  |  |                  |  |                 |  |                  |  |  |  |
|                                        |        |                        |      | RUSH (SURCHARGES APPLY)                                               |   |                  |  | I. Results Only                      |  |                  |  |                 |  |                  |  |  |  |
|                                        |        |                        |      | STANDARD                                                              |   |                  |  | II. Results + QC Summaries           |  |                  |  |                 |  |                  |  |  |  |
|                                        |        |                        |      | REQUESTED FAX DATE                                                    |   |                  |  | III. Results + QC and Calibration Si |  |                  |  |                 |  |                  |  |  |  |
|                                        |        |                        |      | REQUESTED REPORT DATE                                                 |   |                  |  | IV. Data Validation Report with Ra   |  |                  |  |                 |  |                  |  |  |  |
| SAMPLE RECEIPT: CONDITION/COOLER TEMP. |        |                        |      | CUSTODY SEALS: Y N                                                    |   |                  |  | Edata                                |  |                  |  | Yes             |  |                  |  |  |  |
| Relinquished By                        |        | Received By            |      | Relinquished By                                                       |   | Received By      |  | Relinquished By                      |  | Received By      |  | Relinquished By |  | Received By      |  |  |  |
| Signature                              |        | Signature              |      | Signature                                                             |   | Signature        |  | Signature                            |  | Signature        |  | Signature       |  | Signature        |  |  |  |
| Printed Name                           |        | Printed Name           |      | Printed Name                                                          |   | Printed Name     |  | Printed Name                         |  | Printed Name     |  | Printed Name    |  | Printed Name     |  |  |  |
| Kelly McDonald                         |        | Valerie Spradley       |      | Kelly McDonald                                                        |   | Valerie Spradley |  | Kelly McDonald                       |  | Valerie Spradley |  | Kelly McDonald  |  | Valerie Spradley |  |  |  |
| Firm                                   |        | Firm                   |      | Firm                                                                  |   | Firm             |  | Firm                                 |  | Firm             |  | Firm            |  | Firm             |  |  |  |
| FL DEP NERDC                           |        | ALS                    |      | FL DEP NERDC                                                          |   | ALS              |  | FL DEP NERDC                         |  | ALS              |  | FL DEP NERDC    |  | ALS              |  |  |  |
| Date/Time                              |        | Date/Time              |      | Date/Time                                                             |   | Date/Time        |  | Date/Time                            |  | Date/Time        |  | Date/Time       |  | Date/Time        |  |  |  |
| 12/8/20 1530                           |        | 12/8/20 1530           |      | 12/8/20 1530                                                          |   | 12/8/20 1530     |  | 12/8/20 1530                         |  | 12/8/20 1530     |  | 12/8/20 1530    |  | 12/8/20 1530     |  |  |  |

SMP-9



Date of Request: 17-NOV-2020  
 Created By: PARRISH\_J On: 17-NOV-2020  
 Modified By: JASROTIA\_P On: 19-NOV-2020  
 Customer: NE-DIST  
 Project: SMP  
 Division: Division of Environmental Assessment and Restoration  
 District: Northeast District  
 Event Description: Little St.Marys, Alligator SCI

**Send Coolers To:**

Phone: 904-256-1700  
 8800 Baymeadows Way West  
 Suite 100  
 Jacksonville, FL 32256  
 Attn: Jeremy Parrish  
 Cooler Ship Email: Jeremy.M.Parrish@dep.state.fl.us

Priority: 3  
 Event Status: S  
 Criminal Investigation: NO  
 Chemistry Request Reviewed By: WATTS\_J On: 18-NOV-2020  
 Biology Request Reviewed By: JASROTIA\_P On: 19-NOV-2020  
 Sampling Kit Required: YES Ship on: 27-NOV-2020  
 Sampling Kit Shipped: YES On: 23-NOV-2020  
 Sampling Kit Packed By: REYNOLDS\_T  
 Preservatives Needed: NO  
 Date to Receive Samples: 07-DEC-2020  
 Logged In By:

**Send Final Report To:**

8800 Baymeadows Way West  
 Suite 100  
 Jacksonville, FL 32256  
 Attn: Jeremy Parrish  
 Report Notification Email: Jeremy.M.Parrish@dep.state.fl.us

Comments: Group A: Nutrients, Metals, Tracers, Q-PSNP-TQ, Bacteria  
 Group B: SCI, Algae\_ID

NE-ALS-ECQ

Packing Notes:  
 none

**Bottle Group A (Water) With 2 Samples:**

|                             |                      |                                                                                                                                                |
|-----------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| Bottle Type: P-1L           | Number of Bottles: 2 | Preserved With: ICE                                                                                                                            |
| ALKALINITY                  | Template: DEFAULT    | (SM 2320 B-2011) Alkalinity in aqueous matrices as mg CaCO <sub>3</sub> /L                                                                     |
| TURBIDITY                   | Template: DEFAULT    | (EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices                                                                                             |
| W-CL-IC                     | Template: DEFAULT    | (EPA 300.0 Rev. 2.1) Chloride in aqueous matrices                                                                                              |
| W-COLOR                     | Template: DEFAULT    | (SM 2120 B-2011) True Color measured at 450 nm (not valid for NPDES monitoring)                                                                |
| Color (true)                |                      |                                                                                                                                                |
| W-F                         | Template: DEFAULT    | (SM 4500 F-C-2011) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)                                         |
| W-SO <sub>4</sub> -IC       | Template: DEFAULT    | (EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices                                                                                               |
| W-TDS                       | Template: DEFAULT    | (SM 2540 C-2011) Total Dissolved Solids in aqueous matrices                                                                                    |
| W-TSS                       | Template: DEFAULT    | (SM 2540 D-2011) Total Suspended Solids in aqueous matrices using a maximum of 250 mL of sample                                                |
| Bottle Type: BP-1L          | Number of Bottles: 2 | Preserved With: ICE                                                                                                                            |
| CHLSUITE-W                  | Template: DEFAULT    | (SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry                                   |
| Bottle Type: P-250ML-WI-THI | Number of Bottles: 2 | Preserved With: ICE                                                                                                                            |
| NE-ALS-ECQ                  | Template: DEFAULT    | (SM 9223 B Quanti-Tray) E. coli by Colilert/QT by ALS in Jacksonville                                                                          |
| Bottle Type: BG-500ML       | Number of Bottles: 2 | Preserved With: ICE                                                                                                                            |
| W-E8321-DI                  | Template: DEFAULT    | (EPA 8321B) Pesticides, herbicides, and other chemicals in water matrices by HPLC/MS/MS                                                        |
| W-E8321-MS                  | Template: DEFAULT    | (EPA 8321B) Pesticides, herbicides, and other chemicals in water matrices by HPLC/MS/MS                                                        |
| Bottle Type: P-500ML        | Number of Bottles: 2 | Preserved With: HNO <sub>3</sub>                                                                                                               |
| W-HARD                      | Template: DEFAULT    | (SM 2340B) Hardness by calculation, in aqueous matrices, reported as mg/L CaCO <sub>3</sub>                                                    |
| Hardness                    |                      |                                                                                                                                                |
| W-ICP                       | Template:            | (EPA 200.7 Rev. 4.4) Total Recoverable Metals analysis using ICP emission spectroscopy for aqueous samples supporting Clean Water Act Projects |

**Bottle Group A (Water) With 2 Samples:**

|                      |                      |                                                                                                                                                |
|----------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| Bottle Type: P-500ML | Number of Bottles: 2 | Preserved With: HNO3                                                                                                                           |
| W-ICP                | Template:            | (EPA 200.7 Rev. 4.4) Total Recoverable Metals analysis using ICP emission spectroscopy for aqueous samples supporting Clean Water Act Projects |

Barium  
Calcium  
Iron  
Magnesium  
Potassium  
Sodium  
Zinc

|         |           |                                                                                                                             |
|---------|-----------|-----------------------------------------------------------------------------------------------------------------------------|
| W-ICPMS | Template: | (EPA 200.8 Rev. 5.4) Total Recoverable Metals analysis using ICP-MS for aqueous samples supporting Clean Water Act Projects |
|---------|-----------|-----------------------------------------------------------------------------------------------------------------------------|

\*Boron  
Aluminum  
Antimony  
Arsenic  
Beryllium  
Cadmium  
Chromium  
Copper  
Lead  
Nickel  
Selenium  
Silver  
Thallium

|                      |                      |                                                                     |
|----------------------|----------------------|---------------------------------------------------------------------|
| Bottle Type: P-500ML | Number of Bottles: 2 | Preserved With: ICE And H2SO4                                       |
| W-NH3                | Template: DEFAULT    | (EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L          |
| W-NO2NO3             | Template: DEFAULT    | (EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L  |
| W-S-A-TP             | Template: DEFAULT    | (EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L |
| W-TKN                | Template: DEFAULT    | (EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices    |
| W-TOC                | Template: DEFAULT    | (SM 5310 B-2011) Nonpurgeable Organic Carbon in aqueous matrices    |

|                      |                      |                                                                                          |
|----------------------|----------------------|------------------------------------------------------------------------------------------|
| Bottle Type: P-125ML | Number of Bottles: 2 | Preserved With: FILTER-ICE                                                               |
| W-PO4-F              | Template: DEFAULT    | (EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L |

|                    |                      |                                                                                    |
|--------------------|----------------------|------------------------------------------------------------------------------------|
| Bottle Type: BG-1L | Number of Bottles: 6 | Preserved With: ICE                                                                |
| W-PSNP-TQ          | Template: DEFAULT    | (EPA 8270E) Organonitrogen and phosphorus pesticides in water matrices by GC/MS/MS |

**Bottle Group B (Biological) With 2 Samples:**

|                      |                      |                                                                        |
|----------------------|----------------------|------------------------------------------------------------------------|
| Bottle Type: PJ-2L   | Number of Bottles: 4 | Preserved With: Formalin                                               |
| MI-FW-QLDC           | Template: DEFAULT    | (SOP-IZ06) No. Taxa of FW macroinverts, qual samp, 20 dipnets.         |
| Bottle Type: PT-50ML | Number of Bottles: 2 | Preserved With: ICE                                                    |
| ALGAL_ID             | Template: DEFAULT    | (SOP-AB05) Qualitative assessment of algal taxa present without counts |

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