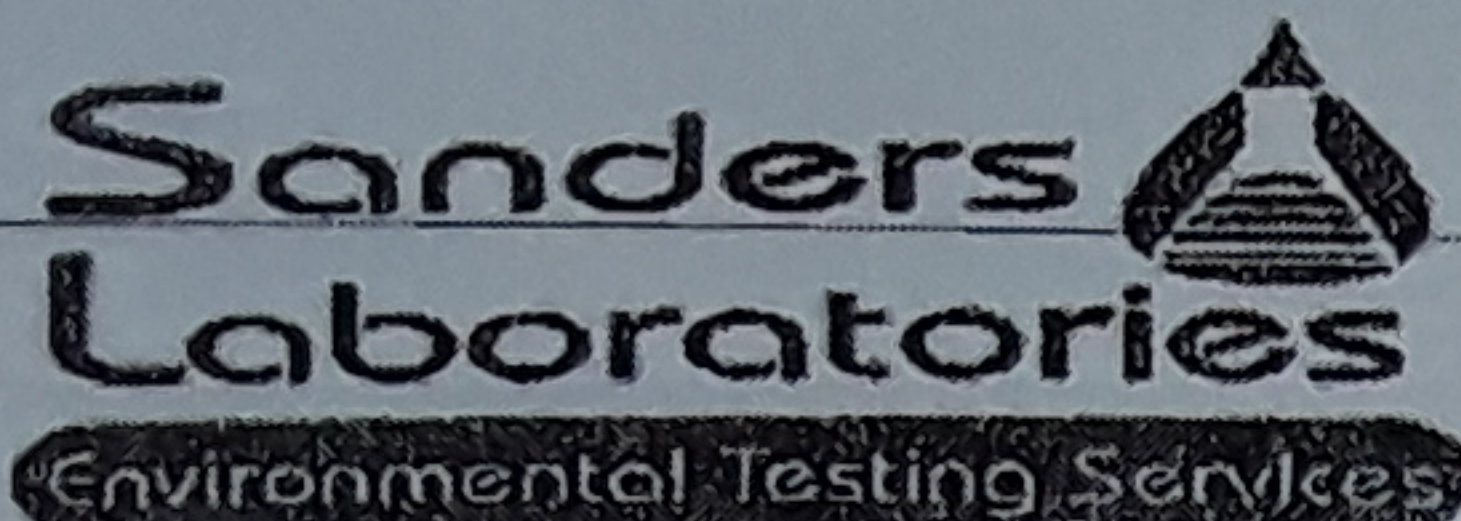




# CHAIN OF CUSTODY RECORD

Project #  
(Lab Use Only)

Client Florida Dept. of Environmental Protection

Address 2600 Blairstone Rd. Tallahassee, FL 32399

Phone 850-245-8085

Fax

Report To: DEP-OverflowMicro@dep.state.fl.us

Bill to: Carina Tull

P.O. # LAB #039

Preservative: HCL = H, HNO<sub>3</sub> = N, Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub> = ST

H<sub>2</sub>SO<sub>4</sub> = S, NaOH = SH, NH<sub>4</sub>Cl = NH

Project Name: SMP: Last Huston Bay

Project Location: Monroe

Customer Type: FDEP - South ROC

Kit #:

Requested Due Date:

| Sampled By (PRINT) <u>Nicole Reistad</u> |                                                   |  |  |  |  | Preservatives               |      |      |  | Analysis Requested |      |                         |  |          |      |      |      |  |  |  |  | Sample ID #<br>(Lab Use Only) |  |  |  |  |
|------------------------------------------|---------------------------------------------------|--|--|--|--|-----------------------------|------|------|--|--------------------|------|-------------------------|--|----------|------|------|------|--|--|--|--|-------------------------------|--|--|--|--|
| Sampler Signature <u>[Signature]</u>     |                                                   |  |  |  |  | Sample                      |      |      |  | H <sub>2</sub> O   | Ice  | S                       |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
| Matrix                                   | Sample Description                                |  |  |  |  | Date                        | Time | Type |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
| M                                        | G5SD0026                                          |  |  |  |  | 12/08/20                    | 1015 | Grab |  | X                  |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  |                             |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
| Bottle Lot #                             |                                                   |  |  |  |  | Relinquished By/Affiliation |      |      |  | Date               | Time | Accepted By/Affiliation |  |          |      | Date | Time |  |  |  |  |                               |  |  |  |  |
|                                          | Samples are ambient water<br><br>RQ-2020-12-07-70 |  |  |  |  | Okay to Run As Is           |      |      |  | <u>[Signature]</u> |      |                         |  | 12/08/20 | 1235 |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  | Client Initial:             |      |      |  | <u>FDEP-SROC</u>   |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  | Samples On Ice              |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |
|                                          |                                                   |  |  |  |  | Yes No                      |      |      |  |                    |      |                         |  |          |      |      |      |  |  |  |  |                               |  |  |  |  |