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: YSI RQ- 2021-05-31-24 Project: Lake Brooklyn LVI

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.

Temperature (Quarterly) FT 1400 Date of Last Temperature Verification 5/18/21

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.	Brian Davis	6/17/21	748	24.4	760.1	8.4	/	100.8	/	1.05	(P) / F	(L) / F
ICV	↓	↓	750	24.5	760.0	8.3	8.33	99.9	/	1.05	(P) / F	(L) / F
CCV	Kim Appleby	↓	1709	26.1	759.9		8.00	99.0	-	1.05	(P) / F	(L) / F
CCV											P / F	L / F

DO Acceptance criteria from Table ± 0.3 mg/L. **Rapid-Pulse Sensors:** DO Gain Range 0.7 to 1.4; DO Charge Range 25-75.
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 µmhos/cm	Meter Reading µmhos/cm	Pass / Fail	Lab / Field
Calibr.	Brian Davis	6/17/21	752	2012221B	1/22	1000	1000	(P) / F	(L) / F
ICV	↓	↓	758	210426A	5/22	100	102.1	(P) / F	(L) / F
CCV	Kim Appleby	↓	1713	2009026	9/21	1413	1408	(P) / F	(L) / F
CCV								P / F	L / F

Conductivity Acceptance criteria ± 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.	Brian Davis	6/17/21	802	2012E39	12/22	7.00	23.8	7.01	-9.7	(P) / F	(L) / F
Calibr.	↓	↓	805	2103G59	3/23	4.00	23.8	4.00	167.5	(P) / F	(L) / F
Calibr.	↓	↓	807	2103F53	9/22	10.01	24.0	10.01	-182.6	(P) / F	(L) / F
ICV	↓	↓	810	2012E39	12/22	7.01	23.9	7.03	-9.2	(P) / F	(L) / F
CCV	Kim Appleby	↓	1718	2103G59	3/23	4.00	24.3	4.15	160.4	(P) / F	(L) / F
CCV										P / F	L / F

pH Acceptance criteria ± 0.2 SU; mV pH 7 Range 0 ± 50; mV pH 4 Range +180 ± 50; mV pH 10 Range -180 ± 50;
If mV are recorded: slope from 7 to 10 -172.9, slope from 4 to 7 177.5 (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: 5/18/21
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	Brian Davis	6/17/21	813	0.00	0.00	(P) / F	(L) / F

Report two decimal places. Round numbers ≤ 4 down, ≥ 5 up. ICV acceptance criteria ± 5 % or ± 0.05m, whichever is greater.

COMMENTS:

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
CHAIN OF CUSTODY FORM

Date:	6/17/2021	**Collected By:**	Kimberly Appleby, Brian Davis
Customer:	NE-DIST	**Sampling Agency:**	FDEP
RQ:	RQ-2021-05-31-24	**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 **Delivery Method:** FedEx

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

Site Location	Field ID/WIN ID
LAKE BROWARD South	G2NE1218

RELINQUISHED BY(SIGNATURE):

DATE/TIME: 6/17/2021 1600EST

THIS SECTION TO BE COMPLETED BY LABORATORY

Rec'd/Inspected By: **Rec'd/Inspected Date**:

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2020

Meter Passed End of Day CCV Yes / No

WIN Station Name: LAKE BROWARD South **Date:** 6/17/2021

WIN/Field ID: G2NE1218 **WBID:** 2617A **ENR:** - **Latitude:** 29.5015

County: PUTNAM **Org ID:** 21FLA **Longitude:** -81.59

Receiving Body of Water: Lower St. Johns **RQ-** 2021-05-31-24

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
[x] Kimberly Appleby		x		x	x
[x] Brian Davis	x		x		
[ ]					
[ ]					

Sampling Equipment

- [x] Sample Container
- [ ] Dipper
- [ ] Syringe
- [ ] Carboy
- [ ] Van Dorn
- [ ] Pole

Depth measured with: Meter

Secchi Equipment ID:

Collection Method

- [ ] **Wading**
- [ ] **From Shore**
- [ ] **Other** _____
- [x] **Canoe/Kayak**
- [ ] **Electric Motor**
- [ ] **Gasoline Motor**

Water Level: [X] Normal [ ] Low [ ] High [ ] Dry [ ] Pooled [ ] Flooded

Meter ID# DESI

Photos: YES **Flow:** NA **Tide:**

Tide Times: High: Low:

Biological Samples Collected: [X] None [ ] HA [ ] SCI [ ] RPS [ ] Algae ID [ ] LVS [ ] LVI Other:

SBIO ID Numbers:

Notes:

Duplicate Sample

Time Zone: EST **Time:** **Field ID:** N/A (WIN ID_DUP)

WIN DMT Activity ID:

Blank

Time Zone: **Time:** **Field ID:** (Blank Type_DDMMYYYY)

DI Source: **Location:**

DI Type: **Equipment ID:**

DI Container (Name/ID): **DI Container Type:**

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:** BD 07/07/2021 (Initials/Date)

Scan/Save Field Sheets BD 06/17/2021 (Initials/Date) **Migrate Data to WIN:** (Initials/Date) **Verify Data In WIN:** (Initials/Date)

RQ-2021-05-31-24
Customer: WQAP
Project ID: SMP

Collected By: Kimberly Appleby, Brian Davis
Field Report Prepared By: Kimberly Appleby
Sampling Agency: FDEP

Place Label Here

WIN ID/Field ID: G2NE1218

Location: LAKE BROWARD South

Comments: Microbiology sample(s) submitted to contract laboratory

Matrix: Fresh

(Check one) ☒ GRAB ☐ COMPOSITE

Date	Time	DO (mg/L)	DO (%SAT)	Temp. (C⁰)	pH	Sample Depth (m)	Secchi Disk (m)	Total Depth (m)	Sp COND (µmhos/cm)	Salinity (PPTh)
6/17/2021	1445 EST	7.06	91.7	29	6.35	0.3	2.2 ☐ VOB (S)	2.8	88.9	0.04
	1448	5.77	74	28.1	6.11	2.0	Central Lab please use top row for login purposes		88.9	0.04
	1450 EST	5.36	68.5	27.9	6.04	2.3			89.5	0.04

Parameter Suite	Parameter Methods	Preservation	pH Check	# Bottles sent to Lab	Bottle Group
Preserved Nutrients (P-500ML)	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H_2SO_4*	☒ <2	1	A
	Lot # SA0293040 **Exp:**	10/19/21			
Metals (P-500ML)	☒ W-ICPMS ☒ W-ICP ☒ W-HARD	☒ Ice ☒ HNO_3*	☒ <2	1	A
	Lot # NA0344060 **Exp:**	1/4/22			
Filtered Nutrients (P125ML)	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter	☒ Ice		1	A
	Filter Lot # R0NB29490				
	Syringe Lot #				
Chlorophyll (BP-1L)	☒ CHLSUITE-W	☒ Ice		1	A
Physical/Aggregate (Fresh) (P-1L)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☒ Ice		1	A
Physical/Aggregate (Marine) (P-1L)	☐ Alkalinity / W-BR-IC / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates (PJ-2L)	☐ MI-FW-QLDC	☐ Formalin			
Periphyton (PT-50ML)	☐ ALGAE-ID	☐ Ice			
Microbiology (Contract Lab Bottle)	☒ E Coli ☐ F Coli ☐ Enterococci ☒ Contract Lab	☒ Ice		1	A
Molecular (QPCR-P-500ML)	☐ PCR-HF183 ☐ PCR-BacR ☐ PCR-DG3 ☐ PCR-GULL2 ☐ PCR-GFD ☐	☐ Ice			
Tracers (BG-500ML)	☒ W-E8321-DI ☒ W-E8321-MS	☒ Ice		1	A
Pesticides (BG-500ML) (BG-1L)	☐ W-E8321-DI ☐ WE8321-MS ☐ W-PSNP-TQ ☐ W-CT-CL-R ☐ W-PCL-TQ-R ☐ W-CARB-AA (5 ml of MCAA** Buffer Solution) ☐ W-DIELDRIN	☐ Ice			
Phytoplankton/Periphyton	☐ DTM-QL-C ☐ PEN-QL-C ☐ DTY-QN-C ☐ PKD-QN-C ☐ DTM-QN-C ☐ PRN-QN-C ☐ PKD-QN-BV	☐ Ice			

Name:
Kimberly Appleby
Brian Davis

Signature: B. D.

Date: 06/17/21

*2.0 ml of Preservative used unless noted otherwise.
**MCAA: Monochloroacetic acid buffer solution

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

ALS Environmental

9143 Philips Highway, Suite 200 Jacksonville, FL 32256 / Ph(904) 739-2277 / FAX (904) 739-2011

SR #

ALS Contact: Mandy Sullivan

Page 1 of 1

Client Name: FDEP-NE ROC	Project Number: RQ-2021-05-31-24
Report To: Dep-Overflowmicro@dep.state.fl.us	Report CC:
Company/Address: 8800 Baymeadows Way W, Jacksonville, Fl 32256	
Phone #: 904-256-1700	FAX #:
Sampler's Signature: B-V-	Sampler's Printed Name: Brian Davis

CLIENT SAMPLE ID	LAB ID	SAMPLING DATE	SAMPLING TIME	Matrix	NUMBER OF CONTAINERS	E.Coli	Enterocooi	REMARKS
G2NE1218		6/17/21	1445	SW	1	✓		Fresh

ANALYSIS REQUESTED (Include Method Number and Container Preservative)

Preservative Key: 0. None; 1. HCL; 2. HNO3; 3. H2SO4; 4. NaOH; 5. Zn. Acetate; 6. MeOH; 7. NaHSO4; 8. ICE

Special Instructions/Comments: Email Report to: Dep-Overflowmicro@dep.state.fl.us

D.O

TURNAROUND REQUIREMENTS

___ RUSH (SURCHARGES APPLY)

X STANDARD

REQUESTED FAX DATE: N/A

REQUESTED REPORT DATE: N/A

REPORT REQUIREMENTS

___ I. Results Only

___ II. Results + QC Summaries (LCS, DUP, MS/MSD as required)

___ III. Results + QC and Calibration Summaries

___ IV. Data Validation Report with Raw Data

Edata ___ Yes ___ No

INVOICE INFORMATION

P.O. # B10739

Bill to:

Relinquished By	Received By	Relinquished By	Received By	Relinquished By	Received By
Signature: B-V-	Signature: Valerie Spears	Signature	Signature	Signature	Signature
Printed Name: Brian Davis	Printed Name: Valerie Spears	Printed Name	Printed Name	Printed Name	Printed Name
Firm: FDEP NEROC	Firm: ALS	Firm	Firm	Firm	Firm
Date/Time: 6/17/21	Date/Time: 6/17/21 1633	Date/Time	Date/Time	Date/Time	Date/Time