



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

STRATEGIC MONITORING PLAN Field Sheet

July 2022

Meter
Passed End
of Day CCV
Yes / No

WIN Station Name:	South Creek near Legacy				Sample Date:	3/20/2023	
WIN / Field ID:	G3SD0183	ORG ID:	21FLFTM	ENR:	-		
County:	Sarasota	WBID:	1982	STREAM	3F		
Receiving Body of Water:	South Creek Oscar Scherer State Park				RQ-	2023-03-13-19	

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Nicole Reistad		x		x	x
Monica Jaeger	x		x		

Sampling Equipment			
x	Sample Container		Carboy
	Dipper		Van Dorn
	Syringe	x	Pole
Syringe Lot#		Filter Lot#	
Secchi Equipment ID:		3312A	
Collection Method			
	Wading		Canoe/Kayak
x	From Shore		Electric Motor
			Gasoline Motor
Depth Measured With Secchi			

Water Level:	Normal
Flow:	Flowing
Matrix:	Fresh
Tide Stage:	
High Tide:	
Low Tide:	
Photos:	Yes
Meter ID:	President Camacho
Depth Gauge ID:	depth_gauge

Time Zone	Time	Total Depth (m)	Sample Depth (m)	DO (mg/L)	DO (%SAT)	Temp. (°C)	pH	Secchi Disk (m)	Sp COND (µmhos/cm)	Salinity (PPTth)
EST	1025	0.3	0.15	6.68	68.5	16.4	7.77	0.3	1131	0.56

Biological Samples Collected:	None	
SBIO Visit ID:	HA ID:	RPS ID:
Macrophyte ID:	LIMS Sample ID Entered Into The Macrophyte Module:	

Parameter Suite	Parameter Methods (LIMS Test Codes)	Preservation			
		Type	Lot#	Expiration Date	pH Check
Microbiology					
Chlorophyll					
Physical/Aggregate Nutrients					
Filtered Nutrients			Syringe Lot#; Filter Lot#:		
Acid Preserved Nutrients					
Metals					
Organics (LC)					
Macroinvertebrates					
Organics (GC)	W-CT-CI-R	W-PCL-TQ-R	W-PCB-TQ-R	Ice	
Molecular					
Periphyton					
Phytoplankton					
BOD					
DOC					
Other(s)					
Field Comments:					
Comments on COC:					
Relinquish Date:	03/20/2023	Signature:			

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)
Save Field Sheets on Network: _____ (Initials/Date)	Migrate Data to WIN: _____ (Initials/Date)