



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

PAGE ____ OF ____

STORET Station Name: _____



STORET Station ID: _____

Date: 4-5-2016
(mm/dd/yyyy)

Data Qualified?
Yes / No

Latitude: 30.323048

(Decimal Degrees)

Longitude: 82.25352

(Decimal Degrees)

WBID: 2274 RQ: 2016-04-04-27 ORG ID: 21FLA

Receiving Body of Water: Caulkins Cr.

Field ID: _____

County: Nassau

Sampling Team Members

WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
	X			
X		X	X	X

Sampling Equipment

- ☒ Sample Container ☐ Van Dorn ☐ Pole
☐ Carboy ☐ Syringe
☐ Dipper ☐ Other _____
Equipment ID: _____

Collection Method

- ☐ Wading ☐ Via Boat
☒ From Shore ☐ Canoe/Kayak
☐ Other (note below) ☐ Electric Motor
☐ Gasoline Motor

Water Level: Dry / Low / Normal / High / Flooded

Meter ID# _____ Photos: Yes / No

Matrix: Fresh / Marine / DI

Tide Falling: Yes / No / NA

Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (µmhos/cm)	Temp. (C°)
EST	1030	0.3	0.44	4.47	46.2	3.75	0.03	0.445	69	16.6
CEN										

Biological Samples Collected: None

HA SCI LVS RPS LVI Other

Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H2SO4			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO2			☐ <2
Filtered Nutrients	☒ W-PO4-F ☐ Field Filtered 0.45 µm Filter	☐ Ice			
Chlorophyll	☒ CHLSUITE-W	☐ Ice			
BOD	☒ BOD UNIN	☐ Ice			
Physical/Aggregate (Kit A)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CHC / W-COLOR / W-SO4-IC / W-TDS	☐ Ice			
Physical/Aggregate (Kit B)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QLDC	☐ Formalin			
Microbiology	☐ E Coli ☐ F Coli ☐ Enteroc ☐ QPCR	☐ Ice			
Periphyton	☐ ALGAE-ID	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other			

Contains
1:1
Sulfuric Acid
SA-5259023
EXP: 09/16/16
Warning!
See MSDS

Notes:

#00125

Place Label Here
(If Available)

Signature: [Signature]

Date: 4-5-2016

Field Parameters Entered into LIMS: [Signature]
(Initials/Date)

Field Parameters QC in LIMS: _____
(Initials/Date)

Date Migrated to STORET: _____
(Initials/Date)

Field Sheets Scanned/Saved: _____
(Initials/Date)