

Log-in Checklist

RQ- 2017-11-06-37

Shipping Method: Fed Ex

Date/Time of Receipt: 11/7/17 10:15

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
RED	1.7°C	14		✓			
BLUE	0.8	12		✓			

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

****Note:** If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

**Chain of Custody/ Field Sheet(s) Included? Yes ☒ No ☐

CONTAINER CHECK

**Evidence Tape on Bottles? Yes ☐ No ☒ If yes, is it intact? Yes ☐ No ☐

**Caps on tight? Yes ☒ No ☐ **Containers intact? Yes ☒ No ☐

**Sufficient Sample Volume: Yes ☒ No ☐

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX		☒	W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R			W-CT-CI-R		

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: Q.S.

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

Coolers Unpacked/Checked by: Q.S. Date: 11/7/17 NCRs (Y/N)? ☐

Event ID: NW-DIST-2017-11-07-02 NCR # ☐

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

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

Were Encore samples received? Yes ☐ No ☒

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 ☐

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: _____

Additional Comments:

Shoal River/Yellow WBID 160A 160B 30

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NW-DIST

Requester: Michael King

Field Report Prepared By:

Project ID: SMP

Collected By:

Sampling Agency:

Location: Shoal River @ Bill Dugger Park SR-85	G4NW0023 Field ID ↑ STORET ↓ G4NW0023	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
RQ-2017-11-06-37 (WBID 160A) Date: 11/6 Time: 1005 CT		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 8.40	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A/B
Temp (C) 18.77	pH 5.64	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 26		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.01	Comments			
Location: Shoal River @ B. Dugger SR-87	G4NW0023DUP Field ID ↑ STORET ↓ G4NW0023DUP	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s)
RQ-2017-11-06-37 (WBID 160A) Date: 11/6 Time: 1010 CT		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A/B
Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments			
Location: Shoal River @ Bill Dugger Park SR-85	FIELD BLANK Field ID ↑	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s)
RQ-2017-11-06-37 (WBID 160A) Date: 11/6 Time: 1015 CT		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A/B
Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments			
Location: Shoal River below Titi Creek	G4NW0410 Field ID ↑ STORET ↓ G4NW0410	☐ Comp ☒ Grab	Collection (comp begin or grab) Date _____ Time _____	Eastern Central	Composite end Date _____ Time _____	Bottle Group(s)
RQ-2017-11-06-37 (WBID 160B) Date: 11/6 Time: 1045 CT		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 8.48	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A/B/C/D
Temp (C) 18.95	pH 5.89	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 27		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.01	Comments			

Relinquished By:

Date/Time

Shipping Method

Number of Coolers Shipped:

Received By:

Date/Time

11/6/17

1600

FDEx

2

9.2

11/7/17 10:45

Group: A	Bottle Type:	P-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>4</u>
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>4</u>
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 4	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	<u>4</u>
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 4	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab	<u>4</u>
	W-PO4-F						
Group: B	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>4</u>
	NW-UWF-ECQ						
Group: C	Bottle Type:	BG-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>1</u>
	W-AHERB-AA						
	W-SUC-AA-R						
	W-UHERB-AA						
Group: D	Bottle Type:	QPCR-P-250ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>1</u>
	PCR-FILTER						

Shoal River/Yellow WBID 160A 160B 30

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NW-DIST

Requester: Michael King

Field Report Prepared By:

Project ID: SMP

Collected By:

Sampling Agency:

Location	Location: Yellow River @ Milligan Park		G4NW0260 Field ID STORET		☐ Comp ☒ Grab	Collection (comp begin or grab) Date	Eastern Central	Composite end Date	Bottle Group(s)	
Field	RQ-2017-11-06-37 (WBID 30)				Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 8.24	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STO	Date: 11/6/17 Time: 1150 CT				Temp (C) 19.73	pH 6.41	Sample Depth 0.5	☐ ft ☒ m	Sp. Conductance (umho/cm) 60	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.03	Comments					A/B/C/D
Location					☐ Comp ☐ Grab	Collection (comp begin or grab) Date	Eastern Central	Composite end Date	Bottle Group(s)	
Field ID					Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #					Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments					
Location					☐ Comp ☐ Grab	Collection (comp begin or grab) Date	Eastern Central	Composite end Date	Bottle Group(s)	
Field ID					Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #					Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments					
Location					☐ Comp ☐ Grab	Collection (comp begin or grab) Date	Eastern Central	Composite end Date	Bottle Group(s)	
Field ID					Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #					Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments					

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
	11/6/17 1600	FEDX	2		11/7/17 10:15

Group: A	Bottle Type:	P-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 4	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	1
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 4	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab	1
	W-PO4-F						
Group: B	Bottle Type:	TEST HAS NO BOTTLE	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	NW-UWF-ECQ						
Group: C	Bottle Type:	BG-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	W-AHERB-AA						
	W-SUC-AA-R						
	W-UHERB-AA						
Group: D	Bottle Type:	QPCR-P-250ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	PCR-FILTER						

Date of Request: 16-OCT-2017
 Created By: KING_M On: 16-OCT-2017
 Modified By: SWANSON_C On: 20-OCT-2017
 Customer: NW-DIST
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District: Northwest District
 Sampling Event: Shoal River/Yellow WBID 160A 160B 30

Send Coolers To:

Phone: SC-595-0605
 160 W Government St
 Suite 208A
 Pensacola, FL 32502-5794
 Attn: Michael King

Send Final Report To:

160 W Government St
 Suite 208A
 Pensacola, FL 32502-5794
 Attn: Michael King

Program Module Number: 1306
 Priority: 3
 Event Status: S
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 18-OCT-2017
 Biology Request Reviewed By: SWANSON_C On: 20-OCT-2017
 Sampling Kit Required: YES Ship on: 23-OCT-2017
 Sampling Kit Shipped: YES On: 23-OCT-2017
 Sampling Kit Packed By: REYNOLDS_T
 Preservatives Needed: YES
 Date to Receive Samples: 06-NOV-2017
 Received By:

Report Type: Final Only
 FTP Data: NO
 QC Report: YES
 Date Log: NO
 Authorization Log: NO

Comments: 4 - cases of sulfuric acid

Bottle Group A (Water) With 4 Samples:

Bottle Type: P-1L	Number of Bottles: 4	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /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) True Color measured at 450 nm
Color (true)		
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO ₄ -IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: BP-1L	Number of Bottles: 4	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 4	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	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-00) Nonpurgeable Organic Carbon in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 4	Preserved With: FILTER-ICE
W-PO ₄ -F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Bottle Group B (Water) With 5 Samples:

Bottle Type: TEST HAS NO	Number of Bottles: 5	Preserved With: ICE
NW-UWF-ECQ	Template: DEFAULT	(SM 9223 Quanti-Tray) Escherichia coli by Colilert 18 Quanti-Tray method by UWF Overflow Laboratory for NWD

Bottle Group C (Water) With 2 Samples:

Bottle Type: BG-1L	Number of Bottles: 2	Preserved With: ICE
W-AHERB-AA	Template: DEFAULT	(USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS

Bottle Group C (Water) With 2 Samples:

Bottle Type: BG-1L	Number of Bottles: 2	Preserved With: ICE
W-SUC-AA-R	Template: DEFAULT	(EPA 8321B) Analysis of sucralose in water matrices by HPLC/MS/MS
W-UHERB-AA	Template: DEFAULT	(USGS O-2060-01) Urea herbicides and other chemicals in water matrices by HPLC/MS/MS

Bottle Group D (Water) With 2 Samples:

Bottle Type: QPCR-P-250ML	Number of Bottles: 4	Preserved With: ICE
PCR-FILTER	Template: DEFAULT	(SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis

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

01000

FedEx Express Package
US AirbillFedEx
Tracking
Number

8113 0562 5639

Form
ID No.

0215

Recipient's Copy

1 From

Date

Sender's
Name

Phone

Company

Address

Dept./Floor/Suite/Room

City

State

ZIP

2 Your Internal Billing Reference

3 To

Recipient's
Name

Phone

Company

Address

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

State

ZIP

Hold Weekday
FedEx location address
REQUIRED. NOT available for
FedEx First Overnight.Hold Saturday
FedEx location address
REQUIRED. Available ONLY for
FedEx Priority Overnight and
FedEx 2Day to select locations.

8113 0562 5639

4 Express Package Service

* To most locations.

Packages up to 150 lbs.
For packages over 150 lbs., use the
FedEx Express Freight US Airbill.

Next Business Day

2 or 3 Business Days

☐ FedEx First Overnight
Earliest next business morning delivery to select
locations. Friday shipments will be delivered on
Monday unless Saturday Delivery is selected.☒ FedEx Priority Overnight
Next business morning.* Friday shipments will be
delivered on Monday unless Saturday Delivery
is selected.☐ FedEx Standard Overnight
Next business afternoon.*
Saturday Delivery NOT available.☐ FedEx 2Day A.M.
Second business morning.*
Saturday Delivery NOT available.☐ FedEx 2Day
Second business afternoon.* Thursday shipments
will be delivered on Monday unless Saturday
Delivery is selected.☐ FedEx Express Saver
Third business day.*
Saturday Delivery NOT available.

5 Packaging

* Declared value limit \$500.

☐ FedEx Envelope*☐ FedEx Pak*☐ FedEx
Box☐ FedEx
Tube☒ Other

6 Special Handling and Delivery Signature Options

Fees may apply. See the FedEx Service Guide.

☐ Saturday Delivery
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.☐ No Signature Required
Package may be left without
obtaining a signature for delivery.☒ Direct Signature
Someone at recipient's address
may sign for delivery.☐ Indirect Signature
If no one is available at recipient's
address, someone at a neighboring
address may sign for delivery. For
residential deliveries only.

Does this shipment contain dangerous goods?

☒ No ☐ Yes
One box must be checked.
As per attached
Shipper's Declaration.☐ Yes
Shipper's Declaration
not required.☐ Dry Ice
Dry Ice, 2, UN 1845 _____ x _____ kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip.
Acct. No. ☐☐ Sender
Acct. No. in Section
1 will be billed.☒ Recipient☐ Third Party☐ Credit Card☐ Cash/Check

Total Packages

Total Weight

Credit Card Auth.

†Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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06435039

01000

FedEx
 Express *Package*
US Airbill
FedEx
Tracking
Number

8085 0983 5662

Form
ID No.

0215

Recipient's Copy

1 From

Date

11/6/17

Sender's
Name

MIKE KING

Phone

850 595 0605

Company

FIDP NW ROC

Address

160 W GOVERNMENT ST

City

PENSACOLA

State

FL

ZIP

32502

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone

850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address

2600 BLAIRSTONE RD

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City

TALLAHASSEE

State

FL

ZIP

32399-6542

0119899133



8085 0983 5662

4 Express Package Service

*To most locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.
 For packages over 150 lbs. use the
 FedEx Express Freight US Airbill.

Next Business Day

☐ FedEx First Overnight
 Earliest next business morning delivery to select
 locations. Friday shipments will be delivered on
 Monday unless SATURDAY Delivery is selected.

☒ FedEx Priority Overnight
 Next business morning.* Friday shipments will be
 delivered on Monday unless SATURDAY Delivery
 is selected.

☐ FedEx Standard Overnight
 Next business afternoon.*
 Saturday Delivery NOT available.

2 or 3 Business Days

☐ FedEx 2Day A.M.
 Second business morning.*
 Saturday Delivery NOT available.

☐ FedEx 2Day
 Second business afternoon.* Thursday shipments
 will be delivered on Monday unless SATURDAY
 Delivery is selected.

☐ FedEx Express Saver
 Third business day.*
 Saturday Delivery NOT available.

5 Packaging

*Declared value limit \$500.

☐ FedEx Envelope*

☐ FedEx Pak*

☐ FedEx
Box

☐ FedEx
Tube

☒ Other

6 Special Handling and Delivery Signature Options

☐ SATURDAY Delivery

NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required
 Package may be left without
 obtaining a signature for delivery.

☐ Direct Signature
 Someone at recipient's address
 may sign for delivery. *Fee applies.*
☐ Indirect Signature
 If no one is available at recipient's
 address, someone at a neighboring
 address may sign for delivery. For
 residential deliveries only. *Fee applies.*

Does this shipment contain dangerous goods?

One box must be checked.

☒ No

☐ Yes
As per attached
Shipper's Declaration.

☐ Yes
Shipper's Declaration
not required.

☐ Dry Ice
Dry Ice, 9, UN 1845

x kg

 Dangerous goods (including dry ice) cannot be shipped in FedEx packaging
 or placed in a FedEx Express Drop Box.

☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip.
Acct. No. ☐
☐ Sender
Acct. No. in Section
I will be billed.

☒ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

Total Packages

Total Weight

Credit Card Auth.

1

60

lbs.

*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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