

RUN 11 Moccasin

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQ-ASSESS

Requester: Judy Ashton

Field Report Prepared By:

L. Bachler

Project ID: SMP

Collected By:

L. Bachler

Sampling Agency:

FDEP

Location		☒ Comp ☐ Grab	Collection (comp begin or grab) Date <u>7/20/17</u> Time <u>10:15</u>		☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)	
Field ID	RQ-2017-07-17-28 Date: 07/20/17 Time: _____ Moccasin Creek	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>1.0</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	A, B, C, D	
STORET #	↓ STORET Field ID ↑ G1SW0051	Temp (C) <u>28.5</u>	pH <u>6.9</u>	Sample Depth <u>0.3</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>7681</u>		
Latitude	☐ dms	☐ dd ☐ dms	Salinity (ppt) <u>4.23</u>	Comments <u>Entero dropped off at AEL</u>				
Location		☒ Comp ☐ Grab	Collection (comp begin or grab) Date <u>7/20/17</u> Time <u>10:20</u>		☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)	
Field ID	RQ-2017-07-17-23 Date: 07/20/17 Time: _____ Moccasin Creek Duplicate	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	B, D	
STORET #	↓ STORET Field ID ↑ G1SW0051	Temp (C) _____	pH _____	Sample Depth _____	☐ ft ☐ m	Sp. Conductance (umho/cm) _____		
Latitude	☐ dms	☐ dd ☐ dms	Salinity (ppt) _____	Comments _____				
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date <u>7/20/17</u> Time <u>10:25</u>		☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)	
Field ID	RQ-2017-07-17-28 Date: 07/20/17 Time: _____ FIELD BLANK	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L) _____	B, D	
STORET #	↓ STORET Field ID ↑ BLANK	Temp (C) _____	pH _____	Sample Depth _____	☐ ft ☐ m	Sp. Conductance (umho/cm) _____		
Latitude	☐ dms	☐ dd ☐ dms	Salinity (ppt) _____	Comments _____				
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central	Composite end Date _____ Time _____	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:

L. Bachler

Date/Time

07/20/17, 1700

Shipping Method

Fed Ex

Number of Coolers Shipped:

3

Received By:

ABJ

Date/Time

07-21-17, 09:35

Collection time from sample.

ABJ 07-21-17.

Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative: ICE	Enter Number of Bottles Sent to Lab	1
	ALKALINITY TURBIDITY W-F W-TSS					
Group: A	Bottle Type:	BP-1L	# of Bottles: 1	Preservative: ICE	Enter Number of Bottles Sent to Lab	1
	CHLSUITE-W					
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative: HNO3	Enter Number of Bottles Sent to Lab	1
	W-ICP W-ICPMS					
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	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: 1	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	1
	W-PO4-F					
Group: B	Bottle Type:	BG-1L	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab	3
	W-AHERB-AA W-GLYPH W-PYR-AA-R W-SUC-AA-R W-UHERB-AA					
	<i>TRAILER + PESTICIDE</i>			<i>DUP + BLANK</i>		
Group: C	Bottle Type:	QPCR-P-250ML	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
	PCR-FILTER					
Group: C	Bottle Type:	P-120ML-WC-THI	# of Bottles: 1	Preservative: ICE	Enter Number of Bottles Sent to Lab	0
	SWD-AEL-EN <i>Enterro dropped off at AEL</i>					
Group: D	Bottle Type:	BG-500ML	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	9
	W-CT-CI-R W-PCL-SQ-R					
	<i>PEST</i>			<i>DUP + BLANK</i>		
Group: D	Bottle Type:	BG-1L	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab	9
	W-PSNP-TQ <i>PEST</i> <i>DUP + BLANK</i>					



Advanced
Environmental Laboratories, Inc.

0001 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.0350 • Fax 904.363.0354 • E02574
0010 Princess Palm Ave. • Tampa, FL 33610 • 813.830.9519 • Fax 813.830.4327 • E04569
2109 NW 67th Place, Cir. 7 • Gainesville, FL 32609 • 352.357.1500 • Fax 352.357.0050 • E02620
329 S. North Lake Blvd., Cir. 1019 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E53078

LAB NUMBER:

Page 1 of 1

CLIENT NAME: FDEP - SW District		PROJECT NAME: TMDL / SMP		BOTTLE SIZE & TYPE		Client Photo Date		LAB NUMBER	
ADDRESS: 13051 N. Telecom Pkwy		P.O. NUMBER/PROJECT NUMBER:		AR					
Tampa Terrace, FL 33637		PROJECT LOCATION: Florida		NE					
PHONE: 813-470-5700		FAX: 813-470-5998		AQ					
CONTACT: Matthew Boarden		SAMPLED BY:		LU					
TURN AROUND TIME:		REMARKS/SPECIAL INSTRUCTIONS:		YI					
☒ STANDARD		PO AF315E		SR					
☐ RUSH				IE					
				SD					
Samples are ambient water and not suspected to contain chlorine									
WW=waste water	SW=surface water	GW=ground water	DW=drinking water	Oral	Aer	CO ₂ gas	SL=sediment		
Field ID	SITE NAME	Grab Comp	SAMPLING		MATRIX	NO. COUNT	Preserv	Ice, T	
			DATE	TIME					
RQ-2017-07-17-28 Date: 07/20/17 Time: Moccasin Creek	 G1SW0051 ↓STORET Field ID ↑ G1SW0051	Grab	7/20/17	1015	SW	1			
		Grab			SW				
		Grab			SW				
		Grab			SW				
		Grab			SW				
		Grab			SW				
		Grab			SW				

Shipment	Method	Sample Kit	Cooler #	Ref: <u>Backler</u>	Date	Time	Received by:	Date	Time
Out:	Via:	RB	D/T		7/20/17	1140		7/20/17	1140
Ret:	Via:	AB	D/T						
		Trip Bl.							

Received on to ☐ Yes ☒ No ☐ sent ☐ received

Date of Request: 22-JUN-2017
 Created By: ASHTON_J On: 22-JUN-2017
 Modified By: WATTS_J On: 27-JUN-2017
 Customer: WQ-ASSESS
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District:
 Sampling Event: RUN 11 Moccasin

Send Coolers To:

Phone: 813-470-5772
 Division Of Water Facilities, FL DEP
 13051 N. Telecom Parkway
 Tampa, FL 33637
 Attn: Judy Ashton

Program Module Number:

Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 27-JUN-2017
 Biology Request Reviewed By: WATTS_J On: 27-JUN-2017
 Sampling Kit Required: YES Ship on: 28-JUN-2017
 Sampling Kit Shipped: YES On: 27-JUN-2017
 Sampling Kit Packed By: REYNOLDS_T
 Preservatives Needed: NO
 Date to Receive Samples: 20-JUL-2017
 Received By: SHAIK_A On: 21-JUL-2017

Send Final Report To:

Division Of Water Facilities, FL DEP
 13051 N. Telecom Parkway
 Tampa, FL 33637
 Attn: Judy Ashton

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

Comments: Group A: Freshwater Kit With Metals
 Group B: Pesticides

Bottle Group A (Water) With 1 Samples:

Bottle Type: P-1L	Number of Bottles: 1	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-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: BP-1L	Number of Bottles: 1	Preserved With: ICE
CHLSUITE-W	Template:	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 1	Preserved With: HNO ₃
W-ICP	Template:	(EPA 200.7 Rev. 4.4) Total Recoverable Metals analysis using ICP emission spectroscopy for aqueous samples supporting Clean Water Act Projects
Chromium		
Iron		
Zinc		
W-ICPMS	Template: PRTY	(EPA 200.8 Rev. 5.4) Total Recoverable Metals analysis using ICP-MS for aqueous samples supporting Clean Water Act Projects
Arsenic		
Cadmium		
Copper		
Lead		
Nickel		
Silver		
Bottle Type: P-500ML	Number of Bottles: 1	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 Group A (Water) With 1 Samples:

Bottle Type: P-125ML Number of Bottles: 1 Preserved With: ICE-FLTR
 W-PO4-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 1 Samples:

Bottle Type: BG-1L Number of Bottles: 2 Preserved With: ICE
 W-AHERB-AA Template: (USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS
 W-GLYPH Template: DEFAULT (EPA 8321B) Glyphosate in water matrices by HPLC/MS/MS
 W-PYR-AA-R Template: DEFAULT (EPA 8321B) Pyraclostrobin in water matrices by HPLC/MS/MS
 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 C (Water) With 1 Samples:

Bottle Type: QPCR-P-250ML Number of Bottles: 2 Preserved With: ICE
 PCR-FILTER Template: DEFAULT (SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis
 Bottle Type: Number of Bottles: 1 Preserved With: ICE
 SWD-AEL-EN Template: DEFAULT (SM 9230 C) Enterococci by membrane filter method by Advanced Environmental Overflow Laboratories for SWD

Bottle Group D (Water) With 2 Samples:

Bottle Type: BG-1L Number of Bottles: 6 Preserved With: ICE
 W-PSNP-TQ Template: DEFAULT (EPA 8270D) Organonitrogen and phosphorus pesticides (ultra trace level) in water matrices by GC/MS/MS
 Bottle Type: BG-500ML Number of Bottles: 6 Preserved With: ICE
 W-CT-CI-R Template: DEFAULT (EPA 8276) Organochlorine pesticides in water matrices by GC/MS with Negative Chemical Ionization
 W-PCL-SQ-R Template: DEFAULT (EPA 8270D) Organochlorine pesticides in water matrices by GC/MS-SIM

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

Log-in Checklist

RQ- 2017-07-17-28

Shipping Method: Fed Exp

Date/Time of Receipt: 7-21-17/9:35

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	1.9C	9		✓			
Red	2.8C	12		✓			
Red	3.6C	7					

*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-Cl-R		☒

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

****Acid Preserved Samples:** pH ≤ 2.0? Yes ☐ No ☐ NA ☐ Init: ☐

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

Coolers Unpacked/Checked by: [Signature] Date: 7-21-17 NCRs (Y/N)? ☐

Event ID: RUN 11 Moccasin NCR # ☐

WQ-ASSESS-2017-07-21-01 (SMP)

Date Received: 21-JUL-2017 09:35

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:

-20-17
Phone **470-5700**
FDEX
13051 N. TELECOM PKWY
TAMPA
State **FL** ZIP **33637**

Bill to Billing Reference
SAMPLE RECEIVING Phone **850 245-8085**

FLORIDA DEP/CHEMISTRY SECTION
600 BLAIRSTONE RD
or to P.O. boxes or P.O. ZIP codes. Dept./Floor/Suite/Room
the NOLG location address or for continuation of your shipping address.

LLAHASSEE State **FL** ZIP **32399**
0126912290

8115 9551 6462

-20-17
Phone **470-5700**
FDEX
13051 N. TELECOM PKWY
TAMPA
State **FL** ZIP **33637**

Bill to Billing Reference
SAMPLE RECEIVING Phone **850 245-8085**

FLORIDA DEP/CHEMISTRY SECTION
600 BLAIRSTONE RD
or to P.O. boxes or P.O. ZIP codes. Dept./Floor/Suite/Room
the NOLG location address or for continuation of your shipping address.

LLAHASSEE State **FL** ZIP **32399**
0126912290

8115 9551 6131

Recipient's Copy

4 Express Package Service *To most locations. Packages up to 150 lbs. For packages over 150 lbs, use the FedEx Express Freight Service.

Next Business Day
☐ FedEx First Overnight
Earliest next business morning delivery to select locations. Priority shipments will be delivered on Monday unless Saturday Delivery is selected.
☒ FedEx Priority Overnight
Next business morning. Priority shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Standard Overnight
Next business morning. 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. Priority 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 restricted deliveries only.

Does this shipment contain dangerous goods?
One box must be checked.
☒ No ☐ Yes (see attached Shipper's Declaration) ☐ Yes (Shipper's Declaration not required) ☐ Dry Ice (Dry Ice UN1845) ☐ Cargo Aircraft Only

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

7 Payment Bill to:
Enter FedEx Acct. No. or Credit Card No. below.
☐ Sender (FedEx bill to Section will be billed) ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages **262** Total Weight **50** lbs. Cash/Card Auth. **611**

Our liability is limited to US\$500 unless you declare a higher value. See the current FedEx Service Guide for details.

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Recipient's Copy

4 Express Package Service *To most locations. Packages up to 150 lbs. For packages over 150 lbs, use the FedEx Express Freight Service.

Next Business Day
☐ FedEx First Overnight
Earliest next business morning delivery to select locations. Priority shipments will be delivered on Monday unless Saturday Delivery is selected.
☒ FedEx Priority Overnight
Next business morning. Priority shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Standard Overnight
Next business morning. 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. Priority 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.

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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 restricted deliveries only.

Does this shipment contain dangerous goods?
One box must be checked.
☒ No ☐ Yes (see attached Shipper's Declaration) ☐ Yes (Shipper's Declaration not required) ☐ Dry Ice (Dry Ice UN1845) ☐ Cargo Aircraft Only

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

7 Payment Bill to:
Enter FedEx Acct. No. or Credit Card No. below.
☐ Sender (FedEx bill to Section will be billed) ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages **262** Total Weight **50** lbs. Cash/Card Auth. **611**

Our liability is limited to US\$500 unless you declare a higher value. See the current FedEx Service Guide for details.

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00416

01000

FedEx Package
Express US Airbill
FedEx
Tracking
Number
1 From
Date **7-20-17**
Sender's
Name

Phone

Company

Address

City

State

ZIP

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 HOLID location address or for continuation of your shipping address.

City TALLAHASSEE

State

ZIP

0126912290



Recipient's Copy

4 Express Package Service

* To select service, check one box.

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 delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx Standard Overnight

Next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

Next Business Day

☐ FedEx 2Day AM

Second business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx 2Day

Second business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx Express Saver

Third business day delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

5 Packaging

* Check one box.

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

6 Special Handling and Delivery Signature Options

* See the FedEx Service Guide.

☐ Saturday Delivery

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

☐ No Signature Required

No signature required for delivery.

☐ Direct Signature

Signature required for delivery.

☐ Indirect Signature

Signature required for delivery. Signature must be from the addressee or authorized agent.

Does this shipment contain dangerous goods?

☒ No☐ Yes

As per manufacturer's instructions.

☐ Yes

Shipping Declaration required.

☐ Dry Ice

Dry Ice 100 lbs. max.

☐ Cargo Aircraft Only

7 Payment

* See the FedEx Service Guide.

☐ Cash☒ Account☐ Third Party☐ Credit Card

Total Payment

Our bill is printed on 100% recycled paper, 50% post consumer waste. See the current FedEx Service Guide for details.

fedex.com 1800.GoFedEx 1800.463.3339

fedex.com 1800.GoFedEx 1800.463.3339