



CHLOROPHYLL

data form (1)



Lake Name: _____ County: _____ Township: _____

Lake Sampling Site (Field ID) Number: _____ (see reverse and mark location on map)

Latitude: _____ Longitude: _____ GPS / Map
Circle

Volunteer Monitor Name(s): _____

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Sampling Event #1 (May) Date Sampled: _____ Time: _____

Secchi Depth: _____ (feet) Composite Sample Depth: _____ (feet)

Weather Conditions (sunny, cloudy, windy, etc.): _____

Unusual Conditions (heavy rain, boating, etc.): _____

Filtering Sample (if 50 cc could not be filtered for this sample, indicate amount filtered): _____ (cc)

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Sampling Event #2 (June) Date Sampled: _____ Time: _____

Secchi Depth: _____ (feet) Composite Sample Depth: _____ (feet)

Weather Conditions (sunny, cloudy, windy, etc.): _____

Unusual Conditions (heavy rain, boating, etc.): _____

Filtering Sample (if 50 cc could not be filtered for this sample, indicate amount filtered): _____ (cc)

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Sampling Event #3 (July) Date Sampled: _____ Time: _____

Secchi Depth: _____ (feet) Composite Sample Depth: _____ (feet)

Weather Conditions (sunny, cloudy, windy, etc.): _____

Unusual Conditions (heavy rain, boating, etc.): _____

Filtering Sample (if 50 cc could not be filtered for this sample, indicate amount filtered): _____ (cc)

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