## AQUATIC CHEMISTRY DATA FORM

Sketch a site map below, labeling your sampling locations.

Name(s)	
Time:	Date
Stream Name:	Watershed Name:
County:	State:
Latitude:	Longitude:
Site Description:	
Weather in Past 24 Hours:	
Weather When Samples Were Taken:	·

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**TABLE 2.17**Chemical Measurements

Sampling Site	Sample ID No.	<b>Chemical Test</b> (e.g., pH, D.O.)	Value and Units (e.g., 8.4 ppm)	Replicate Average (indicate which rows were averaged)