PART 7. SAMPLE COLLECTION AND STORAGE

A. GENERAL HARVESTING INFORMATION  

INSTRUCTIONS: Complete a separate form for each sampling date.

HARVEST DATE\(^1\) ____________________ SAMPLING DATE\(^2\) ____________________ PHI\(^3\) ____________________

\(^1\) Record the date of crop harvest (harvest defined as crop digging, crop cutting, picking, etc.)

\(^2\) Enter the date the samples were placed in sample bags (i.e. sample collection)

\(^3\) Record the number of days from last application to harvest (PHI)

DESCRIPTION OF HARVESTED CROP STAGE
(E.g. commercially mature lettuce heads, green blueberries mature in size, commercially mature plums for drying, mint tops for oil)

____________________________________________________________________________________________________________

NUMBER OF TREES/BUSHES FROM WHICH THE CROP WAS COLLECTED FOR EACH SAMPLE (fruits/nuts only) _________

NUMBER OF ROWS FROM WHICH THE CROP WAS COLLECTED FOR EACH SAMPLE

MINIMUM NUMBER OF FRUIT/HEADS/ROOTS (etc.) COLLECTED (if a minimum sample number is required by protocol) ________

NUMBER OF PLANTS AT EACH END OR LENGTH OF ROW ENDS THAT WERE NOT HARVESTED __________________

WAS LESS THAN 50% OF THE HARVESTABLE CROP SAMPLED? (May be determined by visual estimation): YES ___ NO ___

If NO is checked, contact the Study Director.

HARVESTING EQUIPMENT (Provide a brief description of sampling equipment. Include the make and model numbers, if appropriate. Do not include gloves or sample bags.)

__________________________________________________________________________________

ORDER OF SAMPLE COLLECTION

BRIEFLY DESCRIBE PROCEDURES UTILIZED TO HARVEST CROP (Provide enough details in addition to data entered above to ensure that protocol requirements have been met and to inform a data reviewer exactly how this crop is harvested.

Example 1: “Hand-picked berries from one side of the row, then the other. Collected fruit from high and low, inside and outside, exposed and shielded.” Example 2: “Barley was cut 3-4 inches above the ground with a scythe and left on the ground to dry for hay samples. Each entire plot was cut.”) ATTACH A SEPARATE SHEET IF NECESSARY.

____________________________________________________________________________________________________________

WERE SAMPLES COLLECTED DIRECTLY INTO RESIDUE SAMPLE BAGS? YES___ NO___

IF “NO” IS CHECKED ABOVE, EXPLAIN ________________________________________________________________

____________________________________________________________________________________________________________

ABOVE DATA ENTERED BY: __________________________________________ DATE: __________________

 PART 7 PAGE ___ OF ___

Trial Year 2005

COMPLETE IF APPROPRIATE: "THIS IS A TRUE COPY OF THE ORIGINAL"

THE ORIGINAL IS IN IR-4 FIELD DATA BOOK NO. ______________ INITIALS ___________ DATE _________
FIELD ID NO: ____________
IR-4 FIELD DATA BOOK

PART 7. SAMPLE COLLECTION AND STORAGE

A. (continued) GENERAL SAMPLING INFORMATION

DESCRIPTION OF SAMPLED CROP STAGE (if different from harvested crop, such as dried plums, mint oil)
____________________________________________________________________________________________________________

INSTRUCTIONS: Complete a separate form for each sampling date.

DESCRIBE ANY MODIFICATIONS TO THE HARVESTED CROP SUCH AS TRIMMING, CLEANING, CUTTING, DRYING
AND/OR COMPOSING SAMPLES. IF THE MODIFICATIONS ARE TOO COMPLEX TO BE DESCRIBED BELOW, ATTACH A
SEPARATE SHEET THAT CLEARLY DESCRIBES THE MODIFICATION PROCEDURES (include a description of equipment,
duration of procedure(s), temperatures, etc., as appropriate).

____________________________________________________________________________________________________________

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IF THE SAMPLING OCCURRED AFTER THE HARVEST DATE, DESCRIBE SAMPLE COLLECTION
____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

CHECK ALL PROCEDURES USED TO PREVENT CONTAMINATION OF RESIDUE SAMPLES

__UNCONTAMINATED GLOVES WORN AND CHANGED BETWEEN SAMPLES

__TREATMENTS WERE SAMPLED BY DIFFERENT PEOPLE

__PHYSICALLY SEPARATED TREATED AND UNTREATED SAMPLES

__OTHER, EXPLAIN:

____________________________________________________________________________________________________________

DESCRIBE HOLDING AND TRANSPORT OF SAMPLES FROM FIELD TO FREEZER
(e.g. sample bags placed in cooler with blue ice, then transported by pickup truck to freezer; samples hand-carried to freezer; etc.)
____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

ABOVE DATA ENTERED BY: __________________________________________ DATE: ______________

PART 7 PAGE ___ OF ___

Trial Year 2005
PART 7. SAMPLE COLLECTION AND STORAGE

B. SPECIFIC SAMPLE INFORMATION AND INVENTORY, AND TREATED CROP DESTRUCTION

INSTRUCTIONS: Complete this form or provide equivalent information. USE A SEPARATE PAGE FOR EACH SAMPLE DATE. Enter the date the individual samples were collected (do not enter the harvest date when this date is different from sample date), the sample ID (see protocol Section 18 for Sample ID code), a brief description of the crop part sampled (e.g. turnip roots, turnip tops, tomato fruit, corn forage etc.), the approximate weight of the sample, the approximate time of day of completion of each sample collection—i.e., sample placed in sample bag following any modifications (e.g., 10:15 a.m.), the approximate time of day that each sample was placed in a freezer, the approximate time interval between completion of collection of each sample (placement of the sample in sample bag) and the placement of the sample in freezer (e.g., 45 minutes), the identification code of the freezer where the samples are stored, and the initials of the person providing the above information and the date it is entered on this form.

**SAMPLE COLLECTION DATE:** ______________________

<table>
<thead>
<tr>
<th>Sample ID*</th>
<th>Crop Fraction</th>
<th>Approx. Weight</th>
<th>Approximate Time of Day of Completion of Sample Collection</th>
<th>Approximate Time of Day That Sample Was Placed in Freezer</th>
<th>Approximate Elapsed Time to Freezer from Sample Collection</th>
<th>Freezer ID</th>
<th>Initials &amp; Date</th>
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* See Protocol Section 18 for assigned Sample ID code

Was a GLP-maintained scale used to determine weight of residue samples? YES____ NO____

**CROP DESTRUCT:** Describe how the (leftover) treated crop has been destroyed or handled in such a way that it can not be consumed as a human food or animal feed. Provide date(s) if appropriate. If the (leftover) treated crop was not destroyed because the pesticide use in this trial is registered in your state/territory/province, then that should be indicated here:

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

ABOVE DATA ENTERED BY: __________________________________________ DATE: __________________

PART 7 PAGE ___ OF _____ Trial Year 2005

COMPLETE IF APPROPRIATE: "THIS IS A TRUE COPY OF THE ORIGINAL"

THE ORIGINAL IS IN IR-4 FIELD DATA BOOK NO. _______________ INITIALS ____________ DATE __________
C. FREEZER TEMPERATURE LOG

INSTRUCTIONS: Use this (or an equivalent) form when freezer temperatures are taken manually. For each day that temperatures are taken, directly record the date, the minimum and maximum temperature, the degree units (°F or °C), and provide the initials of the person entering the data. Photocopy this form if space for more freezer records is needed. When temperature records are monitored automatically, the original or certified true copy of the output (disk from data logger, computer printout, etc.) must be placed in this Field Data Book.

MAKE, MODEL AND/OR SERIAL NUMBER IDENTIFIER: _______________________________________________

<table>
<thead>
<tr>
<th>DATE</th>
<th>TEMP MIN/MAX</th>
<th>INITIALS</th>
<th>DATE</th>
<th>TEMP MIN/MAX</th>
<th>INITIALS</th>
<th>DATE</th>
<th>TEMP MIN/MAX</th>
<th>INITIALS</th>
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Unless otherwise noted in the table above, all temperature units are in (circle one):

°C  °F  ___________(Initials)___________________________(Date)

PART 7  PAGE ___ OF ___

Trial Year 2005

COMPLETE IF APPROPRIATE: "THIS IS A TRUE COPY OF THE ORIGINAL"
THE ORIGINAL IS IN IR-4 FIELD DATA BOOK NO. ___________ INITIALS _________ DATE_________
PART 7. SAMPLE COLLECTION AND STORAGE

D. FREEZER CONTENTS LOG

INSTRUCTIONS: Use this (or an equivalent) form to record the movement of residue samples in and out of the freezer. Note the trial ID # (e.g., 06788.99-CA45), “contents” (e.g. treated peppers), the day and time it entered the freezer and the initials of the person putting the samples into the freezer. Also note the date and time the same samples are removed from the freezer and the initials of the person removing the samples from the freezer.

MAKE, MODEL AND/OR SERIAL NUMBER IDENTIFIER: _______________________________________________

<table>
<thead>
<tr>
<th>TRIAL ID#</th>
<th>CONTENTS</th>
<th>DAY/TIME IN</th>
<th>INITIALS</th>
<th>DAY/TIME OUT</th>
<th>INITIALS</th>
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Trial Year 2005
PART 7. SAMPLE COLLECTION AND STORAGE

E. FREEZER MAINTENANCE AND REPAIR LOG

**INSTRUCTIONS:** Complete this form or provide equivalent information. Provide dates and a brief description of maintenance and repair work completed on the freezers relevant to this trial. Be sure to date and initial all entries.

**MAKE, MODEL AND/OR SERIAL NUMBER IDENTIFIER:** ______________________________________

**RECORD DATES AND BRIEF DESCRIPTION OF ANY CALIBRATION, MAINTENANCE AND REPAIR WORK DONE ON FREEZER. ALSO RECORD SOP# FOLLOWED, IF APPLICABLE.**

<table>
<thead>
<tr>
<th>Initials and Date</th>
<th>Was Maintenance or Repair routine? (Check one)</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Routine</td>
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<td>Non-Routine</td>
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