Confirmed X

SAMPLE PROPOSAL
FIT REGION V

EPA Region 5 Records Ctr.
282867
936616

1. Date Form Completed 9/15/89

2. Account # FIN0681SAB TDD # F05-8901-025

EPA I.D. # IND981952831

3. Site Name, City, State North Manchester Foundry Landfill
North Manchester, IN

4. Team Leader Larry Lueck Sampler Angelo Carpodinis

5. Number and Type of Samples:

Soil/Sediment 8 Surface Water – Ground Water 4 –

Residential/Municipal Wells 5 Other

Number of Blanks 2 Number of Duplicates 2

6. RAS Parameters Requested:

A/B/N X Pest/PCB X Volatiles X Metals X Cyanide X

SAS Parameters Requested:

7. Expected Sampling Date(s): W/O 10/9

Expected Shipping Date(s): W/O 10/9

8. Lab Used For Analysis: Organic SOIL BNA P/P LOW H2O " " HAZLET LOW SOIL + H2O VOA (SPL) RW - COMPUCHEM

Inorganic SOIL/H2O COLUMBIA RW VERSAR

SAS

9. Case Number 12901 SAS Number 4801E/4801E

10. Airbill Numbers:

Organic Lab # Coolers # Samples

Inorganic Lab # Coolers # Samples

CRL/SAS Lab # Coolers # Samples

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

RW 1
~120 ft.

REPLY TO THE ATTENTION OF:

Sample Collection Date: 10 - 10 - 89

Recipient Information: North Manchester Water Department
Name

407 E. Main Street
Street Address

North Manchester IN 46962
City State Zip Code

(219) 982-2993
Telephone Number

Ecology and Environment, Inc. has been retained by the United States Environmental Protection Agency (U.S. EPA) under contract 68-01-7347 for the purpose of evaluating sites under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), and the Superfund Amendments and Reauthorization Act (SARA).

A copy of the sample analysis of samples collected from your property will be forwarded by the U.S. EPA within 6 months. If a copy of the sample analysis is not received within 6 months of the sample collection date noted above, a written request may be sent to the U.S. EPA representative indicated below.

It is essential to include the U.S. EPA Identification Number listed below to ensure that your request is properly referenced.

U. S. EPA Identification Number IND981952831

Address requests to:

William Messenger, Chief
Pre-Remedial Unit (5HR11)
United States Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604
(312) 353-1057

Distribution:
White: FIT Site File; TDD No.: F05-8901-025; PAN: FIN0681SB
Yellow: Recipient
Pink: U.S. EPA

RECEIPT FOR SAMPLES

U.S. EPA, 230 S. Dearborn St., Chicago, IL 60604

U. S. EPA ID NO IND 981952531

PROJ. ACCT. NO. FIN06515B / FT1305

TDD F05-890-1025

SPLIT SAMPLES ACCEPTED( ) DECLINED(✓)

FACILITY/OCCUPANT NAME: North Manchester IN, Water Department

FACILITY/OCCUPANT ADDRESS: 407 E. Main St. N. Manchester, IN 46962

SAMPLE NUMBER	DATE	TIME	SPLIT SAMPLES (✓)	OTR*	ITR*	DESCRIPTION OF SAMPLE LOCATIONS	SEMIVOLATILES	PESTICIDES/PCBS	VOLATILES	METALS	CYANIDE			MATRIX
							(✓)							
FW1	10/10/89	2:35				FW1 MSD					✓			

TRANSFERRED BY (Signature) [signature] 10/10/89 (Date) 1435 (Time)

RECEIVED BY: (Signature) [signature] 10/10/89 (Date) 1435 (Time)

DISTRIBUTION
WHITE: FIT SITE FILE
YELLOW: FACILITY/OCCUPANT
GREEN: FIT SAMPLE MANAGEMENT
PINK: U.S. EPA

TITLE: ASST Town Manager

TELEPHONE: 219 982-2993

RW 2

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

Sample Collection Date: 10-10-89

Recipient Information: Manchester Vet Clinic
Name

Rt 1 Box 54
Street Address

North Manchester IN 46962
City State Zip Code

219 982-6673
Telephone Number

Ecology and Environment, Inc. has been retained by the United States Environmental Protection Agency (U.S. EPA) under contract 68-01-7347 for the purpose of evaluating sites under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), and the Superfund Amendments and Reauthorization Act (SARA).

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It is essential to include the U.S. EPA Identification Number listed below to ensure that your request is properly referenced.

U. S. EPA Identification Number IND 981952831

Address requests to:

William Messenger, Chief
Pre-Remedial Unit (5HR11)
United States Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604
(312) 353-1057

Distribution:
White: FIT Site File; TDD No.: F05-8901-029 PAN: FIN0061B
Yellow: Recipient
Pink: U.S. EPA

RECEIPT FOR SAMPLES

U.S. EPA, 230 S. Dearborn St., Chicago, IL 60604

U. S. EPA ID NO IND981152031

PROJ. ACCT. NO. FINDOLA

TDD F05-8901-005

SPLIT SAMPLES ACCEPTED( ) DECLINED( )

FACILITY/OCCUPANT NAME: Manchester Veterinary Clinic

FACILITY/OCCUPANT ADDRESS: Rt 1 Box 54 46962 North Manchester IN

SAMPLE NUMBER	DATE	TIME	SPLIT SAMPLES (✓)	OTR*	ITR*	DESCRIPTION OF SAMPLE LOCATIONS	SEMIVOLATILES	PESTICIDES/PCBS	VOLATILES	METALS	CYANIDE			MATRIX
RW2	10/10/89	1445				RW2	X	X	X	X	X			Water, H2O

TRANSFERRED BY: Angelia Lindley (Signature) 10/11/89 (Date) 1445 (Time)

RECEIVED BY: Manchester Vet. Clinic (Signature) 10/10/89 (Date) 1445 (Time)

DISTRIBUTION
WHITE: FIT SITE FILE
YELLOW: FACILITY/OCCUPANT
GREEN: FIT SAMPLE MANAGEMENT
PINK: U.S. EPA

TITLE: Owner

TELEPHONE: 219 982-6673

Rw3

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

Sample Collection Date: 10-10-89

Recipient Information: NON RESPONSIVE [redacted]

Ecology and Environment, Inc. has been retained by the United States Environmental Protection Agency (U.S. EPA) under contract 68-01-7347 for the purpose of evaluating sites under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), and the Superfund Amendments and Reauthorization Act (SARA).

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It is essential to include the U.S. EPA Identification Number listed below to ensure that your request is properly referenced.

U. S. EPA Identification Number IND981952831

Address requests to:

William Messenger, Chief
Pre-Remedial Unit (5HR11)
United States Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604
(312) 353-1057

Distribution:

White: FIT Site File; TDD No.: F05-8901-025; PAN: VIN0681 5B
Yellow: Recipient
Pink: U.S. EPA

RECEIPT FOR SAMPLES

U.S. EPA, 230 S. Dearborn St., Chicago, IL 60604

U. S. EPA ID NO [illegible]

PROJ. ACCT. NO. [illegible]

TDD [illegible]

SPLIT SAMPLES ACCEPTED( ) DECLINED(✓)

FACILITY/OCCUPANT NAME

NON RESPONSIVE

[redacted]

SAMPLE NUMBER	DATE	TIME	SPLIT SAMPLES (✓)	OTR*	ITR*	DESCRIPTION OF SAMPLE LOCATIONS	SEMIVOLATILES	PESTICIDES/PCBS	VOLATILES	METALS	CYANIDE			MATRIX (Water, Soil, Matrix)
RW3	1/10/99	1500				RW3	X	X	X	X	X			Drinking

TRANSFERRED BY

[illegible] 1/10/99 1500

(Signature) (Date) (Time)

RECEIVED BY:

NON RESPONSIVE

[redacted]

(Signature) (Date) (Time)

TITLE TELEPHONE

NON RESPONSIVE

[redacted]

DISTRIBUTION

WHITE: FIT SITE FILE
YELLOW: FACILITY/OCCUPANT
GREEN: FIT SAMPLE MANAGEMENT
PINK: U.S. EPA

Rw4

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

Sample Collection Date: 10-10-89

Recipient Information: NON RESPONSIVE [redacted]

Ecology and Environment, Inc. has been retained by the United States Environmental Protection Agency (U.S. EPA) under contract 68-01-7347 for the purpose of evaluating sites under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), and the Superfund Amendments and Reauthorization Act (SARA).

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It is essential to include the U.S. EPA Identification Number listed below to ensure that your request is properly referenced.

U. S. EPA Identification Number IND981952831

Address requests to:

William Messenger, Chief
Pre-Remedial Unit (5HR11)
United States Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604
(312) 353-1057

Distribution:

White: FIT Site File; TDD No.: F05-8901-015 ; PAN: FIN08SA
Yellow: Recipient
Pink: U.S. EPA

RECEIPT FOR SAMPLES

U.S. EPA, 230 S. Dearborn St., Chicago, IL 60604

U. S. EPA ID NO IND [illegible] 3031

PROJ. ACCT. NO. [illegible]

TDD [illegible] 901 - [illegible]

SPLIT SAMPLES ACCEPTED( ) DECLINED( )

FACILITY/OCCUPANT NAME NON RESPONSIVE [redacted]

SAMPLE NUMBER	DATE	TIME	SPLIT SAMPLES (✓)	OTR*	ITR*	DESCRIPTION OF SAMPLE LOCATIONS	SEMIVOLATILES	PESTICIDES/PCBS	VOLATILES	METALS	CYANIDE			MATRIX
							(✓)							
RW4	10/10/89	1535				RW4	X	X	X	X	X			Drinking H2O

TRANSFERRED BY

(Signature) [illegible] (Date) 10/10/89 (Time) 1535

RECEIVED BY: NON RESPONSIVE [redacted]

DISTRIBUTION
WHITE: FIT SITE FILE
YELLOW: FACILITY/OCCUPANT
GREEN: FIT SAMPLE MANAGEMENT
PINK: U.S. EPA

TITLE TELEPHONE

NON RESPONSIVE [redacted]

RW5

Unknown depth

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5
230 SOUTH DEARBORN ST.
CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

Sample Collection Date: 10-10-89

Recipient Information: NON RESPONSIVE [redacted]

Ecology and Environment, Inc. has been retained by the United States Environmental Protection Agency (U.S. EPA) under contract 68-01-7347 for the purpose of evaluating sites under the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), and the Superfund Amendments and Reauthorization Act (SARA).

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It is essential to include the U.S. EPA Identification Number listed below to ensure that your request is properly referenced.

U. S. EPA Identification Number IND 980 952 831

Address requests to:

William Messenger, Chief
Pre-Remedial Unit (5HR11)
United States Environmental Protection Agency
230 South Dearborn Street
Chicago, Illinois 60604
(312) 353-1057

Distribution:
White: FIT Site File; TDD No.: F05-8901-025; PAN: CJN068/SB
Yellow: Recipient
Pink: U.S. EPA

RECEIPT FOR SAMPLES

U.S. EPA, 230 S. Dearborn St., Chicago, IL 60604

U. S. EPA ID NO. IND 981752831

PROJ. ACCT. NO. FIN 0,S1,SB HFT1205

TDD F05-890-1025

SPLIT SAMPLES ACCEPTED( ) DECLINED(✓)

FACILITY/OCCUPANT NAME

NON RESPONSIVE

[redacted]

SAMPLE NUMBER	DATE	TIME	SPLIT SAMPLES (✓)	OTR*	ITR*	DESCRIPTION OF SAMPLE LOCATIONS	SEMIVOLATILES	PESTICIDES/PCBS	VOLATILES	METALS	CYANIDE			MATRIX
							(✓)							
RW5	10/10/89	1535				RW5	✓	✓	✓	✓	✓			

TRANSFERRED BY

(Signature) 10/10/89 (Date) 1535 (Time)

RECEIVED BY:

NON RESPONSIVE

[redacted]

DISTRIBUTION

WHITE: FIT SITE FILE
YELLOW: FACILITY/OCCUPANT
GREEN: FIT SAMPLE MANAGEMENT
PINK: U.S. EPA

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Inorganic Traffic Report
(For CLP Use Only)

Case Number: 12901
SAS No. (if applicable):

1. Type of Activity (Check one)
[ ] ENF [ ] NPLD [ ] RA [X] SI [ ] STSI
[ ] ER [ ] O&M [ ] RD [ ] ST [ ] Other (Specify)
[ ] ESI [ ] PA [ ] RIFS [ ] STPA

Non-Superfund Program

Site Name: North Manchester Foundry Landfill

City, State: North Manchester, IN

Site Spill ID: None

2. Region Number: V
Sampling Co.: FIT

Sampler (Name): Angelo Carpodinis

3. Ship To: Columbia Analytical Services (COLUMB) 1152 Third Avenue Longview, WA 98632 ATTN: Fray Adair

4. Date Shipped: 10-12-89
Airbill Number: 1060849075

Carrier: F

Double volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

5. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) (Specify)

CLP Sample Number (From labels)	(A) Sample Description (From box 1)	(B) Concentration L=low M=med H=high	(C) RAS Analysis: Total Metals	(C) RAS Analysis: Cyanide	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding Organic Sample Number	
MEFZ 69	2	L	X	X				EGL 23	
MEFZ 70	2	L	X	X				EGL 24	
MEFZ 71	2	L	X	X				EGL 25	
~~MEFZ 72~~	~~2~~	~~L~~	~~X~~	~~X~~				~~EGL 26~~	A.C 10-12-89
~~MEFZ 73~~	~~2~~	~~L~~	~~X~~	~~X~~				~~EGL 27~~	A.C 10-12-89
MEFZ 74	3	L	X	X				EGL 28	

Shipment is complete

EPA Form 9110-1 (8-88) Replaces EPA Form 2075-6, which may be used. Green - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Street
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0681
PROJECT NAME: FUS 8901-025 / Case # 12901
SAMPLERS: (Signature) Angelo Campodonico

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	1L metals (HNO3)	1L CN- (NaOH)					REMARKS Tag # / Low concentration matrix
MEF269	10-12-89	1300		X	MW1	2	1	1					5-134453 & 5-134454 Monitoring well
MEF270	10-12-89	1500		X	MW2	2	1	1					5-134465 & 5-134466 Monitoring well
MEF271	10-12-89	1500		X	DUP	2	1	1					5-134471 & 5-134472 Monitoring well
~~MEF272~~	~~10-12-89~~			~~X~~	~~MW3~~	~~2~~	~~1~~	~~1~~					~~5-134477 & 5-134478 Monitoring well~~
~~MEF273~~	~~10-12-89~~			~~X~~	~~MW4~~	~~2~~	~~1~~	~~1~~					~~5-134483 & 5-134484 Monitoring well~~
MEF274	10-12-89	1130		X	BLK	2	1	1					5-134489 & 5-134490 Monitoring well

Lot #: 1L Plastics: C9908263

ITR in this cooler # 214

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Campodonico	10-12-89 / 2000				
Relinquished by: (Signature)	**Date / Time**	**Received by: (Signature)**	**Relinquished by: (Signature)**	**Date / Time**	**Received by: (Signature)**
Relinquished by: (Signature)	**Date / Time**	**Received for Laboratory by: (Signature)**	**Date / Time**	**Remarks**	
				Shipped Fed Ex to (COLUMB) Airbill #: 1060849075 Custody Seals: 163322, 163323	

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 02105

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report
(For CLP Use Only)

Case Number: 12901
SAS No. (if applicable):

1. Type of Activity (Check one): ENF, NPLD, RA, [X] SI, STSI, ER, O&M, RD, ST, Other (Specify), ESI, PA, RIFS, STPA

2. Region Number: V
Sampling Co.: FIT
Sampler (Name): Angelo Carpodinis

4. Date Shipped: 10-12-89
Airbill Number: 1060849064
Carrier: F

Non-Superfund Program

Site Name: North Manchester Foundry Landfill
City, State: North Manchester, IN
Site Spill ID: None

3. Ship To: SLP, Inc. (SLP)
8880 Interchange Drive
Houston, TX 77054
ATTN: Larry Rietsema

Triple volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

5. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) (Specify)

CLP Sample Number (From labels)	(A) Sample Description (From box 1)	(B) Concentration L=low M=med H=high	(C) RAS Analysis VOA	BNA	Pest/PCB	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding CLP Inorganic Sample Number	
EGL 23	2	L	X			MW1 + MSD			MEFZ 69	
EGL 24	2	L	X						MEFZ 70	
EGL 25	2	L	X						MEFZ 71	
~~EGL 26~~ A.C	2	L	X						~~MEFZ 72~~	A.C 10-12-89
~~EGL 27~~ A.C	2	L	X						~~MEFZ 73~~	A.C 10-12-89
EGL 28	3	L	X			BLK			MEFZ 74	

Shipment is complete

EPA Form 9110-2 (8-88) Replaces EPA Form 2075-7, which may be used. Blue - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Street
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0081
PROJECT NAME: F05-8901-025 / Case # 12901
SAMPLERS: (Signature) Angelo Campodonico

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	VOM 40 ml						REMARKS (Tag # / Low concentration matrix)
EGL93	10-12-89	1300			MW1 + MSD	6	6						5-134451 5-134457 5-134459 5-134452 5-134458 5-134460 monitoring well
EGL94	10-12-89	1500			MW2	2	2						5-134463 & 5-134464 monitoring well
EGL95	10-12-89	1500			DUP	2	2						5-134469 & 5-134470 monitoring well
~~EGL96~~	~~10-12-89~~				~~MW3~~	~~2~~	~~2~~						~~5-134475 & 5-134476 monitoring well~~
~~EGL97~~	~~10-12-89~~				~~MW4~~	~~2~~	~~2~~						~~5-134481 & 5-134482 monitoring well~~
EGL98	10-12-89	1130			BLK	2	2						5-134487 & 5-134489 monitoring well

Lot #: VOM: B9201133

OTR in this cooler # 221

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Campodonico	10-12-89 2:00				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks	

Remarks: Shipped Fed Ex to SLP
Airbill #: 1060849064
Custody Seals: 163320, 163321

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 02104

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report
(For CLP Use Only)

Case Number: 12901
SAS No. (if applicable):

1. Type of Activity (Check one): [ ] ENF [ ] NPLD [ ] RA [X] SI [ ] STSI [ ] ER [ ] O&M [ ] RD [ ] ST [ ] Other *(Specify)* [ ] ESI [ ] PA [ ] RIFS [ ] STPA

2. Region Number: V
Sampling Co.: FIT
Sampler (Name): Angelo Carpodinis

4. Date Shipped: 10-12-89
Airbill Number: 1060849101
Carrier: F

5. Sample Description *(Enter in Column A)*
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) *(Specify)*

Non-Superfund Program

Site Name: North Manchester Foundry Landfill
City, State: North Manchester, IN
Site Spill ID: None

3. Ship To: Hazleton Labs, Inc. (HAZLET) 515 Science Drive Madison, WI 53711 ATTN: Steven Grupi

Triple volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

CLP Sample Number *(From labels)*	(A) Sample Description *(From box 1)*	(B) Concentration L=low M=med H=high	(C) RAS Analysis VOA	BNA	Pest/PCB	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding CLP Inorganic Sample Number	
EGL 23	2	L		X	X	MSD + MW1			MEFZ69	
EGL 24	2	L		X	X				MEFZ70	
EGL 25	2	L		X	X				MEFZ71	
~~EGL 26~~	~~2~~	~~L~~		~~X~~	~~X~~				~~MEFZ72~~	A.C 10-12-89
~~EGL 27~~	~~2~~	~~L~~		~~X~~	~~X~~				~~MEFZ73~~	A.C 10-12-89
EGL 28	~~2~~ 3	L		X	X	BLK			MEFZ74	
AC 10-10-89										
						Shipment is complete				

EPA Form 9110-2 (8-88) Replaces EPA Form 2075-7, which may be used. Blue - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn St
Chicago, Illinois 6060

CHAIN OF CUSTODY RECORD

PROJ. NO.	PROJECT NAME
FIN0681	F-05-8901-025 / Case # 12901

SAMPLERS: (Signature) Angelo Carpidiras

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	BNA	PP	80 oz Extract				REMARKS Tag # Low Conc. Matrix
~~E6L26~~	~~10-12-89~~			X	MW3	2	2						~~5-134473 5-134494 monitoring well~~
~~E6L27~~	~~10-12-89~~			X	MW4	2	2						~~5-134499 5-134480 monitoring well~~
E6L28	10-12-89	1130		X	BLK	2	2						5-134485 5-134486 monitoring well
													Lot #: 80 oz Amber A9193053
													OTR in cooler # 156

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Carpidiras	10-12-89 2000				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Shipped Fed Ex to HAZLET Airbill #: 1060849101 Custody Seals: 163318, 163319	

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

*U.S. GPO:1988-543-658/81023

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Stre
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0681
PROJECT NAME: F05-8901-085 / Case # 12901
SAMPLERS: (Signature) Angelo Carfagno

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	BNA	PP/PCB OC Ext Vol						REMARKS Tag #	Low conc. matrix
EGL23	10-12-89	1300		X	MW1 + MSD	4	4							5-134449 5-134456	monitoring well
EGL24	10-12-89	1500		X	MW2	2	2							5-134461 & 5-134462	monitoring well
EGL25	10-12-89	1500		X	A-C ~~MW3~~ DUP	2	2							5-134467 & 5-134468	monitoring well
														Lot #: 8002 Number: A917502	
														OTR in cooler #: 156	

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Carfagno	10-12-89 2000				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks Shipped Fed Ex to HAZLET Airbill #: 1060849101 Custody Seals: 163316, 163317	

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 0210

*U.S.GPO:1988-543-630/01025

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report
(For CLP Use Only)

Case Number: 12901
SAS No. (if applicable):

1. Type of Activity (Check one): ENF, NPLD, RA, [X] SI, STSI, ER, O&M, RD, ST, Other (Specify), ESI, PA, RIFS, STPA

2. Region Number: V
Sampling Co.: FIT
4. Date Shipped: 10-12-89
Airbill Number: 1060849031
Sampler (Name): Angelo Carpodinis
Carrier: F

Non-Superfund Program

Site Name: North Manchester Foundry Landfill
City, State: North Manchester, IN
Site Spill ID: None

3. Ship To:
Hazleton Labs, Inc. (HAZLET)
515 Science Drive
Madison, WI 53711
ATTN: Steven Grupi

Triple volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

5. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) (Specify)

CLP Sample Number (From labels)	(A) Sample Description (From box 1)	(B) Concentration L=low M=med H=high	(C) RAS Analysis VOA	BNA	Pest/PCB	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding CLP Inorganic Sample Number
EGW 15	5	L		X	X				MEFZ61
EGW 16	5	L		X	X				MEFZ62
EGN 17	5	L		X	X				MEFZ63
EGL 18	5	L		X	X				MEFZ64
EGL 19	5	L		X	X				MEFZ65
EGL 20	5	L		X	X				MEFZ66
EGL ~~20~~ 21	5	L		X	X				MEFZ67
EGL 22 A-C	5	L		X	X				MEFZ68

Shipment is complete

EPA Form 9110-2 (8-88) Replaces EPA Form 2075-7, which may be used. Blue - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Street
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0681
PROJECT NAME: F05-8901-025 / Case # 12401
SAMPLERS: (Signature) Angelo Carpentieri

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	8 oz EPA VOA extraction							Tag #	REMARKS Low conc. Matrix
EGW15	10-12-89	1220		X	S1	1	1							5-134417	Soil
EGW16	10-12-89	1300		X	S2	1	1							5-134421	Soil
EGW17	10-12-89	1315		X	S3	1	1							5-134425	Soil
EGL18	10-12-89	1390		X	S4	1	1							5-134429	Soil
EGL19	10-12-89	1330		X	S5	1	1							5-134433	Soil
EGL20	10-12-89	1140		X	S6	1	1							5-134437	Soil
EGL21	10-12-89	1150		X	S7	1	1							5-134441	Soil
EGL22	10-12-89	1210		X	S8	1	1							5-134445	Soil

Lot #: 8 oz Jars:
1-5 → F9206133
6-8 → F9206143
OTR in this cooler #. 200

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Carpentieri	10-12-89 2000				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks	

Remarks: Shipped Fed Ex to HAZLET
Airbill #: 1060849031
Custody Seals: 163312, 163313

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 02599

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report
(For CLP Use Only)

Case Number: 12901
SAS No. (if applicable):

1. Type of Activity (Check one): ENF, NPLD, RA, [X] SI, STSI, ER, O&M, RD, ST, Other (Specify), ESI, PA, RIFS, STPA

Non-Superfund Program

Site Name: North Manchester Foundry Landfill

City, State: North Manchester, IN

Site Spill ID: None

2. Region Number: V

Sampling Co.: FIT

Sampler (Name): Angelo Carpodinis

3. Ship To: SLP, Inc. (SLP)
8880 Interchange Drive
Houston, TX 77054
~~Larry~~ A.C. ATTN: Larry Rietsema

4. Date Shipped: 10-12-89

Airbill Number: 1060849020

Carrier: F

Triple volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

5. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) (Specify)

CLP Sample Number (From labels)	(A) Sample Description (From box 1)	(B) Concentration L=low M=med H=high	(C) RAS Analysis VOA	BNA	Pest/PCB	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding CLP Inorganic Sample Number
EGN15	5	L	X						MEFZ61
EGN16	5	L	X						MEFZ62
EGN17	5	L	X						MEFZ63
EGL18	5	L	X						MEFZ64
EGL19	5	L	X						MEFZ65
EGL20	5	L	X						MEFZ66
EGL21	5	L	X						MEFZ67
EGL22	5	L	X						MEFZ68

Shipment is complete

EPA Form 9110-2 (8-88) Replaces EPA Form 2075-7, which may be used. Blue - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn St
Chicago, Illinois 6060

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIW0681
PROJECT NAME: F05-8901-025 / Case # 12901
SAMPLERS: (Signature) Angelo Compodinos

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	120ml VOA						REMARKS Tag #	Low matrix Comment
EGN15	10-11-89	1120		X	S1	2	2						5-134418 & 5-134419	Soil
EGN16	10-11-89	1200		X	S2	2	2						5-134422 & 5-134423	Soil
EGN17	10-11-89	1215		X	S3	2	2						5-134426 & 5-134427	Soil
EGL18 (EGN18)	10-11-89	1310		X	S4	2	2						5-134430 & 5-134431	Soil
EGL19	10-11-89	1330		X	S5	2	2						5-134434 & 5-134435	Soil
EGL20	10-11-89	1140		X	S6	2	2						5-134438 & 5-134439	Soil
EGL21	10-11-89	1150		X	S7	2	2						5-134442 & 5-134443	Soil
EGL22	10-11-89	1210		X	S8	2	2						5-134446 & 5-134447	Soil

Lot #: 120ml Jars:
1-4 → G6170952
5-8 → G6170992
OTP in this cooler ~~#343~~

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Compodinos	10-12-89 2000				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks	

Remarks: Shipped Fed Ex to SPL
Airbill #: 1060849020
Custody Seals: #13314 #13315

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 0260

*U.S.GPO:1988-543-658/81023

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

EPA

Inorganic Traffic Report

(For CLP Use Only)

Case Number: 12901

SAS No. (if applicable):

1. Type of Activity (Check one): [ ] ENF [ ] NPLD [ ] RA [X] SI [ ] STSI [ ] ER [ ] O&M [ ] RD [ ] ST [ ] Other (Specify) [ ] ESI [ ] PA [ ] RIFS [ ] STPA

2. Region Number: V

Sampling Co.: FIT

4. Date Shipped: 10-12-89

Airbill Number: 1060849053

Sampler (Name): Angelo Carpodinis

Carrier: F

Non-Superfund Program

3. Ship To: Columbia Analytical Services (COLUMB) 1152 Third Avenue Longview, WA 98632 ATTN: Fran Adair

Double volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

Site Name: North Manchester Foundry Landfill

City, State: North Manchester IN

Site Spill ID: None

5. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) (Specify)

CLP Sample Number (From labels)	(A) Sample Description (From box 1)	(B) Concentration L=low M=med H=high	(C) RAS Analysis: Total Metals	(C) RAS Analysis: Cyanide	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding Organic Sample Number
MEF261	5	L	X	X				EGN 15
MEF262	5	L	X	X				EGN 16
MEF263	5	L	X	X				EGN 17
MEF264	5	L	X	X				EGL 18
MEF265	5	L	X	X				EGL 19
MEF266	5	L	X	X				EGL 20
MEF267	5	L	X	X				EGL 21
MEF268	5	L	X	X				EGL 22

Shipment is complete

EPA Form 9110-1 (8-88) Replaces EPA Form 2075-6, which may be used. Green - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Street
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0681
PROJECT NAME: F05-8901-025/CASE# 12901
SAMPLERS: (Signature) Angelo Campodonico

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	803 metals						REMARKS Tag #	Low conc. Matrix
MEF261	10-12-89	1220		X	S1	1	1						5-134420	Soil
MEF262	10-12-89	1300		X	S2	1	1						5-134424	Soil
MEF263	10-12-89	1315		X	S3	1	1						5-134428	Soil
MEF264	10-12-89	1320		X	S4	1	1						5-134432	Soil
MEF265	10-12-89	1330		X	S5	1	1						5-134436	Soil
MEF266	10-12-89	1140		X	S6	1	1						5-134440	Soil
MEF267	10-12-89	1150		X	S7	1	1						5-134444	Soil
MEF268	10-12-89	1210		X	S8	1	1						5-134448	Soil

Lot #: 8 02 Jars.
1-5) → F9206133
6-8) → F9206143
ITR in this cooler # 193

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Campodonico	10-12-89 2000				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks	

Remarks: Shipped Fed Ex to (COLUMB)
Airbill #: 1060847053
Custody Seals: 163310, 163311

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Organic Traffic Report
(For CLP Use Only)

Case Number: 12901
SAS No. (if applicable): 4801E

1. Type of Activity (Check one): [ ] ENF [ ] NPLD [ ] RA [X] SI [ ] STSI [ ] ER [ ] O&M [ ] RD [ ] ST [ ] Other (Specify) [ ] ESI [ ] PA [ ] RIFS [ ] STPA

Non-Superfund Program

Site Name: North Manchester Foundry Landfill

City, State: North Manchester, IN

Site Spill ID: NONE

2. Region Number: V

Sampling Co: FIT

Sampler (Name): Angelo Carpodinis

3. Ship to: Compuchem Laboratories
3308 Chapel Hill/Nelson Hwy
RTP, NC 27709
ATTN: Natalie Cowfer

4. Date Shipped: 10-10-89

Airbill Number: 1060849042

Carrier: F

Triple volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

5. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) (Specify)

CLP Sample Number (From labels)	(A) Sample Description (From box 1)	(B) Concentration L=low M=med H=high	(C) RAS Analysis VOA	BNA	Pest/PCB	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding CLP Inorganic Sample Number
EGL08	2	L	X	X	X		RW1 MSD		MEF254
EGL09	2	L	X	X	X		RW2		MEF255
EGL10	2	L	X	X	X		DUP		MEF256
EGL11	2	L	X	X	X		RW3		MEF257
EGN12	2	L	X	X	X		RW4		MEF258
EGN13	2	L	X	X	X		RW5		MEF259
EGN14	~~2~~ 3	L	X	X	X	BLK	BLK		MEF260
A.C 10-10-89									

Shipment 12 complete

EPA Form 9110-2 (8-88) Replaces EPA Form 2075-7, which may be used. Blue - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Street
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0681SB
PROJECT NAME: FOS-8901-025 / Case # 12901 / SAS # 4801E
SAMPLERS: (Signature) Angelo Carpodinis

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	BBL/Pest/PCB 1L	VOA 40ml					REMARKS: Tag #	Low conc. Matrix
EGL11	10-10-89	1500		X	RW3	6	3	3					5-134385 - 5-134390	Res well
EGN12	10-10-89	1535		X	RW4	6	3	3					5-134393 - 5-134398	Res well
EGN13	10-10-89	1535		X	RW5	6	3	3					5-134401 - 5-134406	Reserve
EGNN	10-10-89	1415		X	BLK	6	3	3					5-134409 - 5-134414	Reserve

Lot #: 1L Containers
1-5: H9163083
BLK: E9060104
40ml VOA:
P9201123

OTR in cooler #: 123

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Carpodinis	10-11-89 1300				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks: Shipped Fed Ex to: Compuchem Laboratories (CompU) Airbill: 1060849042 Custody seals: 163308 162309	

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 02598

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Street
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0681SB
PROJECT NAME: FOS-8901-095 / Case # 12901 / SAS # 48016
SAMPLERS: (Signature) Angelo Carpolino

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	ABN/Pest/PCB extractables	VOA 40 ml	A.C				REMARKS
													Tag # Low conc. Matrix
~~EGL08~~	~~10-10-89~~			~~X~~	~~AW1 Rwl + MSD~~	~~6/12~~	~~3/6~~	~~3/6~~	A.C				AC 10 10-89
EGL08	10-10-89	1435		X	AW1 + MSD	16	8	8					5-134351-5-134356 & 5-134359-5-134368 Les
EGL09	10-10-89	~~1445~~ 1445	A.C	X	RW2	6	3	3					5-134369-5-134374 Les wet
EGL10	10-10-89	1445		X	DUP	6	3	3					5-134377-5-134382 Les wet

Lot #: ~~80-03~~ A.C 1L amber
1-5: H9163083
BLK: L9047OH
40 ml VOA:
B9201123

OTR in cooler # 123

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Carpolino	10-10-89 19:00				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks	

Remarks: Shipped Fed Ex to: Compuchem Laboratories (COMPU)
Airbill: 1060849042
Custody Seals: 163306, 163307

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 02597

EPA

United States Environmental Protection Agency
Contract Laboratory Program Sample Management Office
PO Box 818 Alexandria, VA 22313
703-557-2490 FTS 557-2490

Inorganic Traffic Report
(For CLP Use Only)

Case Number: 12901
SAS No. (if applicable): 4801C

1. Type of Activity (Check one)
[ ] ENF [ ] NPLD [ ] RA [X] SI [ ] STSI
[ ] ER [ ] O&M [ ] RD [ ] ST [ ] Other (Specify)
[ ] ESI [ ] PA [ ] RIFS [ ] STPA

Non-Superfund Program

Site Name: North Manchester Foundry Landfill

City, State: North Manchester, IN

Site Spill ID: None

2. Region Number: V

Sampling Co.: FIT

Sampler (Name): Angelo Carpodinis

3. Ship To:
Versar, Inc.
6850 Versar Center
P.O. Box 1549
Springfield, VA 22151
ATTN: Jay Dubbs

4. Date Shipped: 10-10-89

Airbill Number: 1060849016

Carrier: F

Double volume required for matrix spike/duplicate aqueous sample.

Ship medium and high concentration samples in paint cans.

See reverse for additional instructions.

5. Sample Description (Enter in Column A)
1. Surface Water
2. Ground Water
3. Leachate
4. Rinsate
5. Soil/Sediment
6. Oil (SAS)
7. Waste (SAS)
8. Other (SAS) (Specify)

CLP Sample Number (From labels)	(A) Sample Description (From box 1)	(B) Concentration L=low M=med H=high	(C) RAS Analysis: Total Metals	(C) RAS Analysis: Cyanide	(D) Special Handling	(E) Station Location	(F) Date/Time of Sample Collection	(G) Corresponding Organic Sample Number
MEF254	2	L	X	X		RWL ~~TAP~~	A.C 10-10-89	EGL08
MEF255	2	L	X	X		RW2		EGL09
MEF256	2	L	X	X		DUP		EGL10
MEF257	2	L	X	X		RW3		EGL11
MEF258	2	L	X	X		RW4		EGM12
MEF259	2	L	X	X		RW5		EGM13
MEF260	3	L	X	X	BLK	BLK		EGM14

Shipment is Complete

EPA Form 9110-1 (8-88) Replaces EPA Form 2075-6, which may be used. Green - SMO Copy Pink - Region Copy White - Lab Copy for Return to SMO Yellow - Lab Copy

ENVIRONMENTAL PROTECTION AGENCY
Office of Enforcement

REGION 5
230 South Dearborn Street
Chicago, Illinois 60604

CHAIN OF CUSTODY RECORD

PROJ. NO.: FIN0081
PROJECT NAME: F05-8901-025 / Case # 12901 / SAS # 48016

SAMPLERS: (Signature) Angelo Campodonico

STA. NO.	DATE	TIME	COMP.	GRAB	STATION LOCATION	NO. OF CONTAINERS	1 liter metals (HNO3)	1 liter CN - (NaOH)					REMARKS Tag #	Low conc. water
MEF254	10-10-89	1425		X	~~MS~~ RW1	2	1	1					5-134357 — 5-134358	Res well
MEF255	10-10-89	1445		X	RW2	2	1	1					5-134375 — 5-134376	Res. well
MEF256	10-10-89	1445		X	DUP	2	1	1					5-134383 — 5-134384	Res-well
MEF257	10-10-89	1500		X	RW3	2	1	1					5-134391 — 5-134392	Res-well
MEF258	10-10-89	1525		X	RW4	2	1	1					5-134399 — 5-134400	Res well
MEF259	10-10-89	1535		X	RW5	2	1	1					5-134407 — 5-134408	Res well
MEF260	10-10-89	1415		X	BLK	2	1	1					5-134415 — 5-134416	Res well

Lot # 1 liter plastic:
1-5: C9205463
BLK: C9208263
ITR in this cooler # 53

Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Angelo Campodonico	10-10-89 / 1900				
Relinquished by: (Signature)	Date / Time	Received by: (Signature)	Relinquished by: (Signature)	Date / Time	Received by: (Signature)
Relinquished by: (Signature)	Date / Time	Received for Laboratory by: (Signature)	Date / Time	Remarks	

Remarks: Shipped Fed Ex to Versar Inc.
VERSAR. Airbill - 1060849016
Custody Seals 163304 and 163305

Distribution: White — Accompanies Shipment; Pink — Coordinator Field Files; Yellow — Laboratory File

5- 02596

SDMS US EPA Region V

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Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No. ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

4 IF HOLD FOR PICK-UP, Print FEDEX Address Here

Street Address

City | State | ZIP Required

4 SERVICES

1 ☒ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP (Fill in Box H)
2 ☒ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE _____ Lbs
7 ☐ OTHER SPECIAL SERVICE _____
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
	LBS	$	
	LBS		
	LBS		
	LBS		
Total	Total	Total	

Received At
1 ☐ Regular Stop
2 ☐ On-Call Stop
3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No.

Date/Time for FEDEX Use

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

Use of this airbill constitutes your agreement to the service conditions in our current Service Guide which is available upon request. See back of sender's copy of this airbill for further information.

We will not be responsible for any claim in excess of $100 per package, whether the result of loss, damage, delay or non-delivery unless you specify a higher amount in the space to the left, pay 40¢ per additional $100 specified and document your actual loss in the event of a claim. Maximum amount limitations found in the current Federal Express Service Guide apply. Your rights to recover from Federal Express for loss of the intrinsic value of the package, as well as for loss of sales, income, interest, profit, attorneys fees, costs and any other form of damage whether direct, incidental, consequential or special is limited to the greater of $100 or the declared value specified to the left. In no event shall your recovery exceed your actual loss.

In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

5 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use

Base Charges	
Declared Value Charge	
Other 1	
Other 2	
Total Charges	

PART #111800
REVISION DATE 7/88
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FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

PACKAGE TRACKING NUMBER 1060849042

1060849042

SENDER'S COPY

Sender's Federal Express Account Number | Date

1 From (Your Name) Please Print | Your Phone Number (Very Important)

Company | Department/Floor No.

Street Address

City | State | ZIP Required

2 To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important)

Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. # Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No. ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

4 IF HOLD FOR PICK-UP, Print FEDEX Address Here

Street Address

City | State | ZIP Required

4 SERVICES

1 ☐ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP (Fill in Box H)
2 ☐ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE _____ Lbs
7 ☐ OTHER SPECIAL SERVICE _____
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
	LBS		
	LBS		
	LBS		
	LBS		
Total 1	Total 100	Total	

Received At
1 ☐ Regular Stop
2 ☐ On-Call Stop
3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No. 81031

Date/Time for FEDEX Use 10-10 1810

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

Use of this airbill constitutes your agreement to the service conditions in our current Service Guide which is available upon request. See back of sender's copy of this airbill for further information.

We will not be responsible for any claim in excess of $100 per package, whether the result of loss, damage, delay or non-delivery, unless you specify a higher amount in the space to the left, pay 40¢ per additional $100 specified and document your actual loss in the event of a claim. Maximum amount limitations found in the current Federal Express Service Guide apply. Your rights to recover from Federal Express for loss of the intrinsic value of the package, as well as for loss of sales, income, interest, profit, attorneys fees, costs and any other form of damage whether direct, incidental, consequential or special is limited to the greater of $100 or the declared value specified to the left. In no event shall your recovery exceed your actual loss.

In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

5 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use
Base Charges
Declared Value Charge
Other 1
Other 2
Total Charges

PART #111800
REVISION DATE 7/88
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SENDER'S COPY

1060849042

ru

FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
(QUESTIONS? CALL 800-238-5355 TOLL FREE.)

PACKAGE TRACKING NUMBER 3888096133

3888096133

SENDER'S COPY

Sender's Federal Express Account Number | Date

From (Your Name) Please Print | Your Phone Number (Very Important)

Company | Department/Floor No.

Street Address

City | State | ZIP Required

To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important)

Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or R.S. # Zip Codes.)

City | State | ZIP Required

YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

IF HOLD FOR PICK-UP, Print FEDEX Address Here

Street Address

City | State | ZIP Required

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No. ☒ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

Expiration Date

SENDER'S COPY

SERVICES

1 ☒ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100.

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP
2 ☒ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE ____ Lbs.
7 ☐ OTHER SPECIAL SERVICE
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT IN POUNDS ONLY	YOUR DECLARED VALUE (See right)	OVER SIZE
1	[illegible]		
Total 1	Total [illegible]	Total	

Received At: 1 ☐ Regular Stop 2 ☐ On-Call Stop 3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No. [illegible]

Date/Time for FEDEX Use [illegible]

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

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In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use

Base Charges

Declared Value Charge

Other 1

Other 2

Total Charges

PART #2041789900 REVISION DATE 1/94/95
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FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

PACKAGE TRACKING NUMBER 1060849075

1060849075

SENDER'S COPY

Sender's Federal Express Account Number | Date

1 From (Your Name) Please Print | Your Phone Number (Very Important) ( )

Company | Department/Floor No.

Street Address

City | State | ZIP Required

2 To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important) ( )

Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. ● Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct No. ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

H IF HOLD FOR PICK-UP, Print FEDEX Address Here

Street Address

City | State | ZIP Required

4 SERVICES

1 ☐ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP (Fill in Box H)
2 ☐ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE _____ Lbs
7 ☐ OTHER SPECIAL SERVICE _____
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
	LBS		
	LBS		
	LBS		
	LBS		
Total	Total	Total	

Received At:
1 ☐ Regular Stop
2 ☐ On-Call Stop
3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No.

Date/Time for FEDEX Use

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

Use of this airbill constitutes your agreement to the service conditions in our current Service Guide which is available upon request. See back of sender's copy of this airbill for further information.

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In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

5 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use

Base Charges

Declared Value Charge

Other 1

Other 2

Total Charges

PART #111800
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SENDER'S COPY

1060849075

FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

PACKAGE TRACKING NUMBER 1060849031

1060849031

SENDER'S COPY

Sender's Federal Express Account Number | Date

1 From (Your Name) Please Print | Your Phone Number (Very Important) ( )

Company | Department/Floor No.

Street Address

City | State | ZIP Required

2 To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important) ( )

Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. ® Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

H IF HOLD FOR PICK-UP, Print FEDEX Address Here
Street Address
City | State | ZIP Required

4 SERVICES

1 ☐ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP (Fill in Box H)
2 ☐ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE _____ Lbs
7 ☐ OTHER SPECIAL SERVICE _____
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
	LBS		
	LBS		
	LBS		
	LBS		
Total	Total	Total	

Received At
1 ☐ Regular Stop
2 ☐ On-Call Stop
3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No.

Date/Time for FEDEX Use

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

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In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

5 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use
Base Charges
Declared Value Charge
Other 1
Other 2
Total Charges

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SENDER'S COPY

FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

PACKAGE TRACKING NUMBER 1060847064

1060847064

SENDER'S COPY

Sender's Federal Express Account Number | Date

1 From (Your Name) Please Print | Your Phone Number (Very Important) ( )

Company | Department/Floor No.

Street Address

City | State | ZIP Required

2 To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important) ( )

Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. # Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

4 IF HOLD FOR PICK-UP, Print FEDEX Address Here

Street Address

City | State | ZIP Required

4 SERVICES

1 ☐ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP (Fill in Box H)
2 ☐ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE _____ Lbs
7 ☐ OTHER SPECIAL SERVICE _____
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
	LBS		
	LBS		
	LBS		
	LBS		
Total	Total	Total	

Received At
1 ☐ Regular Stop
2 ☐ On-Call Stop
3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No.

Date/Time for FEDEX Use

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

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5 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use

Base Charges	
Declared Value Charge	
Other 1	
Other 2	
Total Charges	

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SENDER'S COPY

FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

PACKAGE TRACKING NUMBER 1060849220

1060849220

SENDER'S COPY

Sender's Federal Express Account Number | Date

1 From (Your Name) Please Print | Your Phone Number (Very Important) ( )

Company | Department/Floor No.

Street Address

City | State | ZIP Required

2 To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important) ( )

Company | Department/Floor No

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. # Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No. ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

4 IF HOLD FOR PICK-UP, Print FEDEX Address Here

Street Address

City | State | ZIP Required

4 SERVICES

1 ☐ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100.

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP (Fill in Box H)
2 ☐ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE _____ Lbs
7 ☐ OTHER SPECIAL SERVICE _____
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
	LBS		
	LBS		
	LBS		
	LBS		
Total	Total	Total	

Received At
1 ☐ Regular Stop
2 ☐ On-Call Stop
3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No.

Date/Time for FEDEX Use

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

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5 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use

Base Charges	
Declared Value Charge	
Other 1	
Other 2	
Total Charges	

PART #111800
REVISION DATE 7/88
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SENDER'S COPY

1060849053

FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

PACKAGE TRACKING NUMBER 1060849053

1060849053

SENDER'S COPY

Sender's Federal Express Account Number | Date

1 From (Your Name) Please Print | Your Phone Number (Very Important) ( )

Company | Department/Floor No.

Street Address

City | State | ZIP Required

2 To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important) ( )

Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. ● Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

4 IF HOLD FOR PICK-UP, Print FEDEX Address Here

Street Address

City | State | ZIP Required

4 SERVICES

1 ☒ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE★
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER★
7 ☐
8 ☐
9 ☐
10 ☐

★Declared Value Limit $100.

DELIVERY AND SPECIAL HANDLING

1 ☐ HOLD FOR PICK-UP (Fill in Box H)
2 ☐ DELIVER WEEKDAY
3 DELIVER SATURDAY (Extra charge) ☐
4 ☐ DANGEROUS GOODS (Extra charge)
5 ☐ CONSTANT SURVEILLANCE SERVICE (CSS) (Extra charge) (Release Signature Not Applicable)
6 ☐ DRY ICE _____ Lbs
7 ☐ OTHER SPECIAL SERVICE _____
8 ☐
9 ☐ SATURDAY PICK-UP (Extra charge)
10 ☐
11 ☐
12 ☐ HOLIDAY DELIVERY (If offered) (Extra charge)

PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
Total	Total	Total	

Received At
1 ☐ Regular Stop
2 ☐ On-Call Stop
3 ☐ Drop Box 4 ☐ B.S.C. 5 ☐ Station

FEDEX Corp. Employee No.

Date/Time for FEDEX Use

SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY

Use of this airbill constitutes your agreement to the service conditions in our current Service Guide which is available upon request. See back of sender's copy of this airbill for further information.

We will not be responsible for any claim in excess of $100 per package, whether the result of loss, damage, delay or non-delivery, unless you specify a higher amount in the space to the left, pay 40¢ per additional $100 specified and document your actual loss in the event of a claim. Maximum amount limitations found in the current Federal Express Service Guide apply. Your rights to recover from Federal Express for loss of the intrinsic value of the package as well as for loss of sales, income, interest, profit, attorneys fees, costs and any other form of damage whether direct, incidental, consequential or special is limited to the greater of $100 or the declared value specified to the left. In no event shall your recovery exceed your actual loss.

In the event of untimely delivery, Federal Express will at your request and with some limitations, refund all transportation charges paid. See Service Guide for further information.

5 Sender authorizes Federal Express to deliver this shipment without obtaining a delivery signature and shall indemnify and hold harmless Federal Express from any claims resulting therefrom.

Release Signature: _____

Federal Express Use
Base Charges
Declared Value Charge
Other 1
Other 2
Total Charges

PART #111800
REVISION DATE 7/88
PRINTED IN U.S.A. GBFE
009

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FEDERAL EXPRESS MULTIPLE PACKAGE SERVICE

SHIPMENT DATE	MASTER AIRBILL NUMBER
10/12/88	1060849101

DESCRIPTION	OF 2097390854
DESCRIPTION	OF 2097390863
DESCRIPTION	OF 2097390872
DESCRIPTION	OF 2097390881
DESCRIPTION	OF 2097390897

PART #105972 SRCF REV. 1/88 © 1988 F.E.C.
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FEDERAL EXPRESS

AIRBILL

USE THIS AIRBILL FOR DOMESTIC SHIPMENTS WITHIN THE CONTINENTAL U.S.A., ALASKA AND HAWAII.
USE THE INTERNATIONAL AIR WAYBILL FOR SHIPMENTS TO PUERTO RICO.
QUESTIONS? CALL 800-238-5355 TOLL FREE.

PACKAGE TRACKING NUMBER 1060849101

1060849101

SENDER'S COPY

Sender's Federal Express Account Number | Date

1 From (Your Name) Please Print | Your Phone Number (Very Important) ( )

Company | Department/Floor No.

Street Address

City | State | ZIP Required

2 To (Recipient's Name) Please Print | Recipient's Phone Number (Very Important) ( )

Company | Department/Floor No.

Exact Street Address (We Cannot Deliver to P.O. Boxes or P.O. # Zip Codes.)

City | State | ZIP Required

3 YOUR BILLING REFERENCE INFORMATION (FIRST 24 CHARACTERS WILL APPEAR ON INVOICE.)

PAYMENT ☐ Bill Sender ☐ Bill Recipient's FedEx Acct. No. ☐ Bill 3rd Party FedEx Acct. No. ☐ Bill Credit Card ☐ Cash

H IF HOLD FOR PICK-UP, Print FEDEX Address Here
Street Address
City | State | ZIP Required

4 SERVICES

1 ☐ PRIORITY 1 Overnight Delivery
2 ☐ COURIER-PAK OVERNIGHT ENVELOPE*
3 ☐ OVERNIGHT BOX
4 ☐ OVERNIGHT TUBE
5 ☐ STANDARD AIR Delivery not later than second business day
6 ☐ OVERNIGHT LETTER*
7 ☐
8 ☐
9 ☐
10 ☐

*Declared Value Limit $100

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PACKAGES	WEIGHT	YOUR DECLARED VALUE (See right)	OVER SIZE
	LBS		
	LBS		
	LBS		
	LBS		
Total	Total	Total	

Received At
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Release Signature: _____

Federal Express Use

Base Charges	
Declared Value Charge	
Other 1	
Other 2	
Total Charges	

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