State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
744 P Street
Sacramento, CA 95814

MAY 11, 1983

UNIFORM HAZARDOUS WASTE MANIFEST

Health Services

R 04 44 177-0

Please print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83029818

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
American Bentley
17502 Armstrong Ave.
Irvine, CA 92714

JUL 6 1983

AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER CAD009627441

TRANSPORTER NO. 1
Omega Chemical Corp.
12504 E. Whittier, Blvd.
Whittier, CA 90602

VEH./CONTAINER NO. 42507

EPA ID NUMBER CAD042245001

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
Omega Chemical Corp.

EPA ID NUMBER CAD042245001

AREA CODE/PHONE NUMBER 698-0991

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT. NO.	DISP. METH.
Fluorosolv TF NONE		880	G	01	DK	211	G1

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS	
Fluorosolv TF	99	10		
Ethanol	8	2		
Resin	5	2		

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature PETER MICHELLE Peter Michelle MO 05 DAY 17 YR 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature Henry Solomon Henry Solomon

DATE REC'D & ACCEPTED MO 05 DAY 17 YR 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number, see instructions.

Printed or typed full name and signature Steve Simpson Steve Simpson

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 05 DAY 17 YR 83

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD009627241
Manifest Document No.
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
American Bentley Labs
17512 Armstrong Ave
Irvine CA 92714

4. Generator's Phone (714) 241-8363

A. State Manifest Document Number 84341368 V
B. State Generator's ID CAD009627241

5. Transporter 1 Company Name
Omega Chemical Corp
6. US EPA ID Number CAD042245001
C. State Transporter's ID 62572
D. Transporter's Phone (213) 698-0991

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Omega Chemical Corp
12504 E. Whittier Blvd
Whittier CA. 90602
10. US EPA ID Number CAD042245001
G. State Facility's ID CAD042245001
H. Facility's Phone (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
GENERATOR a. Hazardous Waste Liquid 9181 Freon	25	Dm	1375	gal	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Freon TF 95%
water 5%

K. Handling Codes for Wastes Listed Above
R01

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name: Gilbert Gonzales Jr.
Signature: Gilbert Gonzales Jr.
Date: Month 05 Day 03 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Isaac Woods Jr.
Signature: Isaac Woods Jr.
Date: Month 05 Day 03 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: STEVEN SIMPSON
Signature: Steve Simpson
Date: Month 05 Day 03 Year 85

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
TO: P.O. Box 3000, Sacramento, CA 95812

DHS 8022 A (7/84)
(EPA 8700-22)

84 60541

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on elite 12 pitch typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No: CAD009627241

Manifest Document No:

Page 1 of 1

Information in the shaded areas is not required by Federal law.

A. State Manifest Document Number: 84341364

B. State Generator's ID: CAD009627241

C. State Transporter's ID: 55909

D. Transporter's Phone: (213) 698-0991

E. State Transporter's ID:

F. Transporter's Phone:

G. State Facility's ID: CAD042245001

H. Facility's Phone: (213) 698-0991

2. Generator's Name and Mailing Address: American Bentley Labs, 17502 Armstrong Ave, Irvine Calif. 92714

4. Generator's Phone:

5. Transporter 1 Company Name: Omega Chemical Corp.

6. US EPA ID Number: CAD042245001

7. Transporter 2 Company Name:

8. US EPA ID Number:

9. Designated Facility Name and Site Address: Omega Chemical Corp. 12504 E. Whittier Blvd. Whittier CA. 90602

10. US EPA ID Number: CAD042245001

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste Liquid UN 9181 Freon TF	19	DM	1045	gals	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above: FREON TF 95% Water 5%

K. Handling Codes for Wastes Listed Above: 01

15. Special Handling Instructions and Additional Information:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name: Gilbert Gonzales Jr. Signature: Gilbert Gonzales Jr. Date: Month 3 Day 15 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: ISAAC Woods Jr Signature: Isaac Woodsf Date: Month 3 Day 15 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: STEVEN SIMPSON Signature: Steve Simpson Date: Month 03 Day 05 Year 85

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
TO: P.O. Box 3000, Sacramento, CA 95812

DHS 8022 A (7/84)
(EPA 8700-22)

04 00641

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714 P Street
Sacramento, CA 95814

MAY 11, 1983

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

P.O. # R-177-0

Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 83029818

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
American Bentley
17502 Armstrong Ave.
IRVINE, CA. 92714

JUL 6 1983

AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER CAD009627411

TRANSPORTER NO. 1
Omega Chemical Corp.
12504 E. Whittier, Blvd.
Whittier, CA 90602

VEH./CONTAINER NO. 42507

EPA ID NUMBER CAD042245001

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO.

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
Omega Chemical Corp.

AREA CODE/PHONE NUMBER 698-0991

EPA ID NUMBER CAD042245001

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT NO.	DISP. METH.
Fluorosolv TF NONE	—	880	G	016	DM	211	01

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM
Fluorosolv TF.	99	10		
Ethanol	8	2		
Resin	5	2		

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature PETER MICHELLE Peter Michelle — MO. 5 DAY 11 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature Henry Solomon Henry Solomon — DATE REC'D & ACCEPTED MO. 5 DAY 11 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature — DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature Steve Simpson Steve Simpson

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO. 05 DAY 11 YR. 83

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

REQUESTED PICK UP DATE: 10/25/83. RETURN MATERIAL ON OR ABOUT NOV.1st. P.O.#R-589-0

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST
OCTOBER 21, 1983

STATE ID NUMBER 83376174

Please print or type with ELITE type (12 characters per inch).

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
AMERICAN BENELEY
17502 Armstrong Ave.
Irvine, CA 92714
AREA CODE/PHONE NUMBER 714/546-8020

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAD009627241

TRANSPORTER NO. 1
OMEGA CHEMICAL CORP.
12504 E. Whittier Blvd.
Whittier, CA 90602

VEH./CONTAINER NO.
EPA ID NUMBER CAD042245001

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY
VEH./CONTAINER NO.
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
AREA CODE/PHONE NUMBER 213/698-0991
EPA ID NUMBER CAD042245001

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	CONTAINER TYPE	WASTE CAT. NO.	DISP. METH.
HAZARDOUS WASTE, LIQUID N.O.S.-ORM-E	NA9189		G	016	DM	211	01
(FLUOROSOLV TF)							

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
Fluorosolv TF	99	10		
Ethanol	8	2		
Resin oil	5	2		

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA.

Printed or typed full name and signature PETER J. MICHELLE Peter J. Michelle MO. 10 DAY 24 YR. 83

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature Henry Solomon Henry Solomon
DATE REC'D & ACCEPTED MO. 10 DAY 24 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature Steve Simpson
EPA ID NUMBER CAD042245001
DATE RECEIVED & ACCEPTED MO. 10 DAY YR. 83

FORM NO. DHS-8022A 11/82

GENERATOR SENDS THIS COPY TO DOHS WITHIN 15 DAYS

06/01/2001 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST
July 26, 1984

Department of Health Services
P.O.# R-202

STATE ID NUMBER 83493865

Please print or type with ELITE type (12 characters per inch)

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
AMERICAN BENTLEY
17502 Armstrong Ave.
Irvine, CA 92714
AREA CODE/PHONE NUMBER 714/546-8020

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD009627411
~~CAD009612728~~

TRANSPORTER NO 1
OMEGA CHEMICAL CORP.
12504 E.Whittier Blvd.
Whittier CA 90602

VEH/CONTAINER NO 42507
EPA ID NUMBER C AD 0 4 2 245 0 01

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER C A D 0 4 2 245 0 01

AREA CODE/PHONE NUMBER 213/698-0991

PROPER US DOT SHIPPING NAME AND HAZARD CLASS	UN NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	CONTAINER TYPE	WASTE CAT NO	DISP METH
Hazardous Waste, Liquid NOS - ORM-E (FLUOROSOLV TF)	N A 9 1 89		P	16	DM	210	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
TRICHLOROTRIFLUOROETHANE	99	95	%	
WATER	5	1	%	

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

KEN ROEBEL Kenneth Roebel
Printed or typed full name and signature

MO 07 DAY 26 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Henry Solomon
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO 07 DAY 26 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature

DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number See instructions.
STEVE SIMPSON
Printed or typed full name and signature

EPA ID NUMBER C AD 0 4 2 245 0 01

DATE RECEIVED & ACCEPTED MO 07 DAY 26 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

05/31/2001 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD009627241 — Manifest Document No.
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
American Bentley Labs
12502 Armstrong Ave., Irvine, Ca. 92714
4. Generator's Phone (714) 261-8363 Ext. # 470

A. State Manifest Document Number: 84277697
B. State Generator's ID: CAD009627241

5. Transporter 1 Company Name: Omega Recovery Service
6. US EPA ID Number: CAD042245001
C. State Transporter's ID: 701737
D. Transporter's Phone: (213) 698-0991

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
Omega Recovery Service
12504 E. Whittier Blvd.
Whittier, Ca. 90602
10. US EPA ID Number: CAD042245001
G. State Facility's ID
H. Facility's Phone: (213) 698-0991

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	I. Waste No.
a. Hazardous Liquid Waste N.O.S. ORM-E NA9189 (Freon TF)	23	DM	1150	G	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Freon 95%
Water 5%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.
Sign. in behalf of American Bentley

Printed/Typed Name: Ricky Nelson — Signature: Ricky Nelson — Date: Month 10 Day 23 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Isaac Woods Jr — Signature: Isaac Woods Jr — Date: Month 10 Day 23 Year 86

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name — Signature — Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Frank Ford — Signature: Frank Ford — Date: Month 10 Day 23 Year 86

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
TO: P.O. Box 3000, Sacramento, CA 95812

DHS 8022 A (7/84)
(EPA 8700-22)

84 00541

04/27/2000 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD009627241
Manifest Document No.:
2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
American Bentley Labs
17502 Armstrong Ave
Irvine Calif. 92714

4. Generator's Phone ( )

A. State Manifest Document Number: 84341364
B. State Generator's ID: CAD009627241

5. Transporter 1 Company Name: Omega Chemical Corp.
6. US EPA ID Number: CAD042245001
C. State Transporter's ID: 55909
D. Transporter's Phone: (213) 698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
Omega Chemical Corp.
12504 E. Whittier Blvd.
Whittier CA. 90602

10. US EPA ID Number: CAD042245001
G. State Facility's ID: CAD042245001
H. Facility's Phone: (213) 698-0991

GENERATOR

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste Liquid un 9181 Freon TF	19	DM	1045	gals	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
FREON TF 95%
Water 5%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name: Gilbert Gonzales Jr.
Signature: Gilbert Gonzales Jr.
Date: Month 3 Day 5 Year 85

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ISAAC Woods Jr
Signature: Isaac Woods Jr.
Date: Month 3 Day 5 Year 85

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Date: Month Day Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: STEVEN SIMPSON
Signature: Steve Simpson
Date: Month 03 Day 05 Year 85

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
TO: P.O. Box 3000, Sacramento, CA 95812

DHS 8022 A (7/84)
(EPA 8700-22)

84 80541

State of California—Health and Welfare Agency

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. C A D 0 0 9 6 2 7 2 4 1 — Manifest Document No. 870135

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
American Bentley Labs.
17502 Armstrong Ave., Irvine CA 92714

4. Generator's Phone (714) 261-8363 (ext. #470)

A. State Manifest Document Number: 86057862

B. State Generator's ID: 403785

5. Transporter 1 Company Name: Omega Recovery Service

6. US EPA ID Number: C A D 0 4 2 2 4 5 0 0 1

C. State Transporter's ID:

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
Omega Recovery Service
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number: C A D 0 4 2 2 4 5 0 0 1

G. State Facility's ID:

H. Facility's Phone:

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste, Liquid N.O.S. ORM-E NA 9189	07	DM	800	G	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Trichlorotrifluroethane 95%
Water 5%

K. Handling Codes for Wastes Listed Above
01

15. Special Handling Instructions and Additional Information
Rubber gloves, goggles, mask w/organic Vapor canister
Tax #HA HQ 36-014304

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Sign in behalf

Printed/Typed Name: Ricky Nelson — Signature: Ricky Nelson — Month Day Year: 04 23 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: TIM BALTIERRA — Signature: [illegible] — Month Day Year: 04 23 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: — Signature: — Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: FRANK FORD — Signature: [illegible] — Month Day Year: 04 23 87

DHS 8022 A (11/85)
(EPA 8700—22)

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento CA 95812

04/27/2000 "ORIGINAL MANIFEST COPY"

State of California — Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
Sacramento, California

Please print or type. *(Form designed for use on elite (12-pitch) typewriter.)*

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No: CAD009622412 — Manifest Document No: 870392

2. Page 1 of

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
American Bentley Labs
17502 Armstrong Ave., Irvine CA 92714

4. Generator's Phone (714) 261-8363

A. State Manifest Document Number: 86057865

B. State Generator's ID:

5. Transporter 1 Company Name: Omega Recovery Service

6. US EPA ID Number: CAD042245991

C. State Transporter's ID: 803756

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone:

9. Designated Facility Name and Site Address
Omega Recovery Service
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number: CAD042245991

G. State Facility's ID:

H. Facility's Phone: (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste methylene chloride DRM-A UN 1593	004	DM	00190	G	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Methylene chloride 80%
Urethane 10%
Tax #HA HO 36-014304

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Acid gas cartridge, rubber gloves, splashproof goggles, lab coat or overalls

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Sign in behalf

GENERATOR

Printed/Typed Name: Ricky Nelson — Signature: Ricky Nelson — Month Day Year: 04 08 87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ISAAC Woods Jr — Signature: Isaac Woods Jr — Month Day Year: 04 08 87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: — Signature: — Month Day Year:

TRANSPORTER

19. Discrepancy Indication Space

FACILITY

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD — Signature: Frank Ford — Month Day Year: 04 08 87

86057865

DHS 8022 A (11/85)
(EPA 8700—22)

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To: P.O. Box 3000, Sacramento CA 95812

04/27/2000 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-88)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAD009627241
Manifest Document No.: 87162037

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
Bentley Labs Inc.
17502 Armstrong Ave., Irvine, CA 92714

4. Generator's Phone (714) 250-3774 Ext. 3774

A. State Manifest Document Number: 87162037

B. State Generator's ID:

5. Transporter 1 Company Name: Van Waters & Rogers

6. US EPA ID Number: CAD000823044

C. State Transporter's ID: 801085

D. Transporter's Phone:

7. Transporter 2 Company Name:

8. US EPA ID Number:

E. State Transporter's ID:

F. Transporter's Phone: 860-5217

9. Designated Facility Name and Site Address
Omega Recovery Service
12504 E. Whittier Blvd.
Whittier, CA 90602

10. US EPA ID Number: CAD042245001

G. State Facility's ID: CAD042245001

H. Facility's Phone: (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No. State / EPA/Other
a. Waste 1-1-1 Tricholoroethane ORM-A UN 2831	040	DM	24000	WT	211 /
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
1-1-1 Trichloroethane 95%
Dioctyl phthalate 5%

K. Handling Codes for Wastes Listed Above
a. 01
b.
c.
d.

15. Special Handling Instructions and Additional Information
Neoprene gloves, goggles, chemical splash suit
Van Waters & Rogers Account
Tax #HA HO 36-014304

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MARK TRIPLETT
Signature: Sign in behalf Mark Triplett
Month Day Year: 11/1/87

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: MICHAEL STEVENSON
Signature: Michael Stevenson
Month Day Year: 11/1/87

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19
Printed/Typed Name: CHRISE MARTINEZ
Signature: Chrise Martinez
Month Day Year:

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

DHS 8022 A (1/87)
EPA 8700—22
(Rev. 9-86) Previous editions are obsolete.

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To: P.O. Box 3000, Sacramento, CA 95812

INSTRUCTIONS ON THE BACK

05/30/2001 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency
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See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88346420

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAL 000 121 005
Manifest Document No. 46420
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER -INFUSION SYSTEMS
5842 RESEARCH DR., HUNTINGTON ~~PARK~~ Beach, CA. 92649
4. Generator's Phone (714) ~~XXXX~~ 851-9066

A. State Manifest Document Number 88346420
B. State Generator's ID

5. Transporter 1 Company Name
OMEGA RECOVERY SERVICES
6. US EPA ID Number CAD 042 245 001
C. State Transporter's ID 2084957
D. Transporter's Phone (213) 698-0991

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLV.
WHITTIER, CA. 90602
10. US EPA ID Number CAD 042 245 001
G. State Facility's ID CAD042245001
H. Facility's Phone (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S., ORM-E NA 9189 (Refrigerant R-113) NON-FLAMMABLE GAS	1002	DM	000195	G	State 341 / EPA/Other F002
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
a.-MATERIAL FOR DISPOSAL

K. Handling Codes for Wastes Listed Above
a. 01 b. c. d.

15. Special Handling Instructions and Additional Information
PROFILE#B10445 *EMERGENCY (714) - 890-8038

16.
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: DAPHNE R. Gallagher
Signature: Daphne R. Gallagher
Month Day Year: 10 7 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 7 91

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John Hart
Signature:
Month Day Year: 7 9 91

DHS 8022 A (1/88)
EPA 8700—22

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAL000121995 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
INFUSION SYSTEMS CORP
5842 RESEARCH DRIVE.., HUNTINGTON BEACH CA 92649
4. Generator's Phone (714) 895-8038

A. State Manifest Document Number 88676082
B. State Generator's ID
C. State Transporter's ID 012455
D. Transporter's Phone 213/ 698-0991
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID CAD042245001
H. Facility's Phone 213/ 698 0991

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES | 6. US EPA ID Number: CAD 042 245 001
7. Transporter 2 Company Name | 8. US EPA ID Number

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD 042 245 001

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	L Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S NA 9189 (WASTE TRICHLOROTHRIFLUOROETHANE)	001	DM	000050	G	State X03 x 211; EPA/Other R001
b.					State; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above: a. 01 b. c. d.

15. Special Handling Instructions and Additional Information
PROFILE NUMBER A-15712

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: D. HIVELEY | Signature: D Hiveley | Month Day Year: 12/21/89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ | Signature: Javier Hernandez | Month Day Year: 12/21/89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD | Signature: Frank Ford | Month Day Year: 12/21/89

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

886 76082

Do Not Write Below This Line

8022 A (1/88)
6700-22
(Rev. 6-88) Previous editions are obsolete.

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and Front of Page 7

Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAL 000 121 005
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER-IV SYSTEMS DIVISION
5842 RESEARCH DR., HUNTINGTON BEACH, CA 92649
4. Generator's Phone (714) 895-8038

A. State Manifest Document Number: 88681518
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 710236
D. Transporter's Phone: 213 698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTABLE LIQUID, N.O.S NA 1993 (WASTE OIL) LOW (IGN)	0101	DM	0010210	G	State 221 / EPA/Other D001
b. HAZARDOUS WASTE LIQUID, ORM-E UN 2831 (FREON 113)	0101	DM	0100150	G	State 211 / EPA/Other F002
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
a. 01 b. 01
c. d.

15. Special Handling Instructions and Additional Information
PROFILE NUMBER B 10445

16.
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MICKEAL JOHNSON
Signature: Mickeal A. Johnson
Month Day Year: 1/12 1990

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 1/12 1990

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: JOHN HAUTE
Signature:
Month Day Year: 1/12 1990

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88681518

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Department of Health Services
Toxic Substances Control Division
Sacramento, California

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD009627241 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law

A. State Manifest Document Number 84341368

3. Generator's Name and Mailing Address
American Bentley Labs
17502 Armstrong Ave
Irvine CA 92714

B. State Generator's ID CAD009627241

4. Generator's Phone (714) 241-8363

5. Transporter 1 Company Name: Omega Chemical Corp | 6. US EPA ID Number: CAD042245001

C. State Transporter's ID 62572

D. Transporter's Phone (213) 698-0991

7. Transporter 2 Company Name | 8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
Omega Chemical Corp
12504 E. Whittier Blvd
Whittier CA. 90602

10. US EPA ID Number: CAD042245001

G. State Facility's ID CAD042245001

H. Facility's Phone (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste Liquid 9181 Freon	25	Drm	1375	gal	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Freon TF 95%
water 5%

K. Handling Codes for Wastes Listed Above
R01

15. Special Handling Instructions and Additional Information
1060 [illegible] — yield on TF

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.

Printed/Typed Name: Gilbert Gonzales Jr. | Signature: Gilbert Gonzales Jr. | Date (Month Day Year): 05 03 85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Isaac Woods Jr. | Signature: Isaac Woods | Date (Month Day Year): 05 03 85

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name | Signature | Date (Month Day Year)

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name: STEVEN SIMPSON | Signature: Steve Simpson | Date (Month Day Year): 05 03 85

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TO: P.O. Box 3000, Sacramento, CA 95812

DHS 8022 A (7/84)
(EPA 8700-22)

84 89541

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Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAL 000 121 005
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER-INFUSION SYSTEMS CORP
5842 RESEARCH DR.,HUNTINGTON BEACH, CA 92649
4. Generator's Phone (714) 895-8038

A. State Manifest Document Number: 88681777
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 11023
D. Transporter's Phone: 213 698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S, ORM-E NA 9189 (REFRIGERANT R-113) NON FLAMMABLE GAS	002	DM	010	V	State 341 / EPA/Other F002
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
A) FOR DISPOSAL

K. Handling Codes for Wastes Listed Above
a. 01
b.
c.
d.

15. Special Handling Instructions and Additional Information
PROFILE NUMBER B 10445

16.
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: ANTHONY A. LUTTRELL
Signature:
Month Day Year: 10 22 91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J. Crawford
Signature:
Month Day Year: 10 22 91

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: N. JAY SOLOMON
Signature: N. Jay Solomon
Month Day Year: 10 22 91

Do Not Write Below This Line

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EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

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0013 .0346

GENERATOR

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88681777

State of California—Health and Welfare Agency
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See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAL 000 121 005
Manifest Document No.: 34 85 8
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER-IV SYSTEMS DIV.,AMBULATORY INFUSION BUS
5842 Research Drive,Huntington ~~Park~~ Beach CA, Ca. 92649
4. Generator's Phone (714) 894-6744

A. State Manifest Document Number: 88684858
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 110237
D. Transporter's Phone: (213) 698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER, CA. 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Hazardous Waste LIQUID N.O.S, ORM-E NA 9189 (Trichlorotrifluoroethane,Oil,Water,Dirt,Invert Solids)	003	DM	00120	G	State 211 EPA/Other F001
b. Hazardous Waste LIQUID N.O.S,ORM-E NA 9189 (EmptyDrums of Trichlorotrifluoroethane, Oil, Water,Dirt,Invert Solids-PREVIOUSLY CONTAINED)	006	DM	00000	G	State 211 EPA/Other F001
c. 8 5GAL (MTS)	008	DM	00000	G	State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
a,b-Material to be disposed

K. Handling Codes for Wastes Listed Above
a. 01 b. 01
c. 01 d. 01

15. Special Handling Instructions and Additional Information
Profile #B10444
B10444
*Emergency# (714) 894-6744

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: DAPHNE R. GALLAGHER
Signature: Daphne R Gallagher
Month Day Year: 05 20 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J CIRINGEON
Signature: Robert J C
Month Day Year: 5 20 91

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: N. JAY SOLOMON
Signature: N. Jay Solomon
Month Day Year: 10 5 20 91

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550.

88684858

DHS 8022 A (1/88)
EPA 8700—22
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Do Not Write Below This Line

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State of California—Health and Welfare Agency

HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street
Sacramento, CA 95814

Jan. 26, 1983

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

P.O. # R917-0

(Please print or type with ELITE type (12 characters per inch).

STATE ID NUMBER 8271358

TO BE FILLED IN BY THE GENERATOR

GENERATOR NAME AND MAILING ADDRESS
AMERICAN BENTLEY
17502 Armstrond Ave., Irvine CA. 92714
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
small generator

TRANSPORTER NO. 1
OMEGA CHEMICAL CORP.
12504 E. Whittier Blvd., Whittier, CA. 90602

VEH./CONTAINER NO.

EPA ID NUMBER
CA D0 42245001

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
213/698-0991
AREA CODE/PHONE NUMBER

EPA ID NUMBER

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	CONTAINER TYPE	WASTE CAT. NO.
FLOURSOLV TF NONE		11040	gals	16	DM	211

COMPONENTS	CONC. UPPER	RANGE LOWER	UNITS %	UNITS ppm
Floursolv T.F	99	10	%	
Ethenol	8	2	%	
resin	5	2	%	

SPECIAL HANDLING INSTRUCTIONS

16 @ $20 55 gal drums
IW 1-28-83

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA.

PRINTED OR TYPED FULL NAME AND SIGNATURE Peter Michelle — MO. 1 DAY 28 YR. 83

☐ CHECK IF CONTINUATION SHEET IS USED. NUMBER OF CONTINUATION SHEETS _____

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE MATERIALS — DATE REC'D & ACCEPTED

PRINTED OR TYPED FULL NAME AND SIGNATURE Isaac Woods J. — MO. 01 DAY 28 YR. 83

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE MATERIALS — DATE REC'D & ACCEPTED

PRINTED OR TYPED FULL NAME AND SIGNATURE — MO. DAY YR.

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE
gold 12 drums. 690 #'s

Facility owner or operator: Certification of receipt of hazardous material covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions. — DATE REC'D & ACCEPTED

STEVE SIMPSON

PRINTED OR TYPED FULL NAME AND SIGNATURE — EPA ID NUMBER CA D0 42245001 — MO. 1 DAY 26 YR. 83

Original—White—Disposer send to DHS; Green—Hauler; Yellow—Disposer; Pink—Generator

DHS 8022 (7/82)

05/16/2000 "ORIGINAL MANIFEST COPY"

of California—Health and Welfare Agency
RDOUS WASTE MANAGEMENT BRANCH
14 P Street
ento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

JUNE 28, 1984

Department of Health Services
P.O.# R-136-0

print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83493944

GENERATOR NAME AND MAILING ADDRESS
AMERICAN BENTLEY (DAN RICHARDS)
17502 Armstrong Ave.
Irvine, CA 92704
AREA CODE/PHONE NUMBER 714/546-8020

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD009612721

TRANSPORTER NO 1
OMEGA CHEMICAL CORP.
12504 E. Whittier Blvd
Whittier CA 90602

VEH/CONTAINER NO 4/12-50/7
EPA ID NUMBER CAD042245001

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO
EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.
AREA CODE/PHONE NUMBER 213/698-0991
EPA ID NUMBER CAD042245000

PROPER US DOT SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	CONTAINER TYPE	WASTE CAT NO	DISP METH
Hazardous Waste Liquid NOS - ORM-E (FLUOROSOLV TF)	Na 9189	~~8,280~~ 880	G	16	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
~~DICHLOROTRIFLUOROMETHANE~~ TRICHLOROTRIFLUORO ETHANE	99%	95%	%	
WATER	5%	1%	%	

SPECIAL HANDLING INSTRUCTIONS
Yield to follow after processing.

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature: KEN ROEBEL [signature]

MO 07 DAY 02 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature: [signature]
DATE REC'D & ACCEPTED MO 07 DAY 02 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO DAY YR

BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions

Printed or typed full name and signature: STEVE SIMPSON [signature]

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO 07 DAY 02 YR 84

DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

05/16/2000 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
Please print or type. (Form designed for use on elite (12-pitch typewriter).

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAL 1000 121 005
Manifest Document No. 464201
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER -INFUSION SYSTEMS
5842 RESEARCH DR., HUNTINGTON ~~PARK~~ Beach, CA. 92649
4. Generator's Phone (714) ~~XXXX~~ 851-9066 DRL 7/1/91

A. State Manifest Document Number 88346420
B. State Generator's ID

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID 2084351
D. Transporter's Phone (213) 698-0991

7. Transporter 2 Company Name
8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLV.
WHITTIER, CA. 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID CAD 042 245 001
H. Facility's Phone (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S., ORM-E NA 9189 (Refrigerant R-113) NON-FLAMMABLE GAS	002	DM	010095	G	State 341 / EPA/Other F002
b.					State / EPA/Other
c.					State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
a.-MATERIAL FOR DISPOSAL

K. Handling Codes for Wastes Listed Above
a. 01
b.
c.
d.

15. Special Handling Instructions and Additional Information
PROFILE#B10445
*EMERGENCY (714) - 893-8038

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAPHNE R. Gallagher
Signature: Daphne Gallagher
Month Day Year: 10 7 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Day Year: 10 7 91

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John Hart
Signature
Month Day Year: 7 4 91

Do Not Write Below This Line

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88346420

DHS 8022 A (1/88)
EPA 8700—22

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAL 000 121 005
Manifest Document No.: 84 85 8
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER-IV SYSTEMS DIV.,AMBULATORY INFUSION BUS
5842 Research Drive,Huntington~~Park~~ Beach, Ca. 92649
4. Generator's Phone (714 894-6744

A. State Manifest Document Number: 88684858
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 110257
D. Transporter's Phone: (213) 698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD.
WHITTIER, CA. 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: (213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
[b]Hazardous Waste LIQUID N.O.S, ORM-E NA 9189 (Trichlorotrifluoroethane,Oil,Water,Dirt,Invert Solids)	003	DM	00120	G	State 211 / EPA/Other F001
[b]Hazardous Waste LIQUID N.O.S,ORM-E NA 9189 (EmptyDrums of Trichlorotrifluoroethane, Oil, Water,Dirt,Invert Solids-PREVIOUSLY CONTAINED)	006	DM	00000	G	State 211 / EPA/Other F001
c. 8 5GAL (MTS)	008	DM	000100	G	State / EPA/Other
d.					State / EPA/Other

J. Additional Descriptions for Materials Listed Above
a,b-Material to be disposed

K. Handling Codes for Wastes Listed Above
a. 01 b. 01
c. 01 d. 01

15. Special Handling Instructions and Additional Information
Profile #B10444
B10444
*Emergency#(714)894-6744

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: DAPHNE R. GALLAGHER
Signature: Daphne R. Gallagher
Month Day Year: 05 20 91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert J GRINGEON
Signature: Robert J G
Month Day Year: 5 20 91

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: N. JAY SOLOMON.
Signature: N. Jay Solomon
Month Day Year: 10 5 1 20 91

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88684858

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EPA 8700—22

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State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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See Instructions on Back of Page 6 and Front of Page 7.

Department of Health Services
Toxic Substances Control Division
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAL 000 121 005
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER-INFUSION SYSTEMS CORP
5842 RESEARCH DR.,,HUNTINGTON BEACH, CA 92649
4. Generator's Phone (714) 895-8038

A. State Manifest Document Number: 88681777
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 10237
D. Transporter's Phone: 213 698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S, ORM-E NA 9189 (REFRIGERANT R-113) NON FLAMMABLE GAS	002	DM	010/VOG		State 321; EPA/Other F002
b.					State; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above
A) FOR DISPOSAL

K. Handling Codes for Wastes Listed Above
a. 01
b.
c.
d.

15. Special Handling Instructions and Additional Information
PROFILE NUMBER B 10445

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: ANTHONY A. LUTTRELL
Signature:
Month Day Year: 022291

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Robert T. CARINGELL
Signature:
Month Day Year: 022291

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: N. JAY SOLOMON
Signature: N. Jay Solomon
Month Day Year: 022291

Do Not Write Below This Line

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento, CA 95812

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EPA 8700—22
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0013 0045

GENERATOR

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88681777

Form Approved OMB No. 2050—0039 (Expires 9-30-91)
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and Front of Page 7

Toxic Substances Control Division
Sacramento, California

88681518

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.: CAL 000 121 005
Manifest Document No.:
2. Page 1 of
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
BAXTER-IV SYSTEMS DIVISION
5842 RESEARCH DR., HUNTINGTON BEACH, CA 92649
4. Generator's Phone (714) 895-8038

A. State Manifest Document Number: 88681518
B. State Generator's ID:

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES
6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 110236
D. Transporter's Phone: 213 698-0991

7. Transporter 2 Company Name:
8. US EPA ID Number:
E. State Transporter's ID:
F. Transporter's Phone:

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602
10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE COMBUSTABLE LIQUID, N.O.S NA 1993 (WASTE OIL) LOW (IGN)	0101	DM	0010010	G	State 221 EPA/Other D001
b. HAZARDOUS WASTE LIQUID, ORM-E UN 2831 (FREON 113)	0101	DM	0100150	G	State 211 EPA/Other F002
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above
a. 01 b. 01
c. d.

15. Special Handling Instructions and Additional Information
PROFILE NUMBER B 10445

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: MICKEAL JOHNSON
Signature: Mickeal Johnson
Month Day Year: 1/20 90

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ
Signature: Javier Hernandez
Month Year: 1/20 1990

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name:
Signature:
Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: John Hart
Signature:
Month Day Year: 1/21 6 90

GENERATOR
TRANSPORTER
FACILITY

DHS 8022 A (1/88)
EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

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White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento, CA 95812

Please print or type. (Form designed for use on elite (12-pitch typewriter).) and Front of Page 7 Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAL000121995 | Manifest Document No. | 2. Page 1 of | Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
INFUSION SYSTEMS CORP
5842 RESEARCH DRIVE.., HUNTINGTON BEACH CA 92649
4. Generator's Phone (714) 895-8038

A. State Manifest Document Number 88676082
B. State Generator's ID

5. Transporter 1 Company Name: OMEGA RECOVERY SERVICES | 6. US EPA ID Number: CAD 042 245 001
C. State Transporter's ID: 013455
D. Transporter's Phone: 213/698-0991

7. Transporter 2 Company Name | 8. US EPA ID Number
E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
OMEGA RECOVERY SERVICES
12504 E. WHITTIER BLVD
WHITTIER, CA 90602 | 10. US EPA ID Number: CAD 042 245 001
G. State Facility's ID: CAD042245001
H. Facility's Phone: 213/698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. HAZARDOUS WASTE LIQUID N.O.S NA 9189 (WASTE TRICHLOROTHRIFLUOROETHANE)	001	DM	000050	G	State X01 x 211; EPA/Other F001
b.					State; EPA/Other
c.					State; EPA/Other
d.					State; EPA/Other

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above: a. 01 b. c. d.

15. Special Handling Instructions and Additional Information
PROFILE NUMBER A-15712

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: D. HIVELEY | Signature: D Hiveley | Month Day Year: 1/22/89

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ | Signature: Javier Hernandez | Month Day Year: 1/22/89

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name | Signature | Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: FRANK FORD | Signature: Frank Ford | Month Day Year: 1/22/89

Do Not Write Below This Line

DHS 8022 A (1/88)
DTSC 8700-22
(Rev. 6-88) Previous editions are obsolete.

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento, CA 95812

GENERATOR — TRANSPORTER — FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

88676082

AMERICAN BENTLEY 148

Revised Manifest Summary Report

AMERICAN BENTLEY
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
07/26/1984		83493865		7339.2	LBS		CMP		

Total Records: 1 Default Volume: 0 Total Waste Volume: 3.6696

State of California – Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST
July 25, 1984

Department of Health Services
P.O. # R-202

Please print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83493865

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
AMERICAN BENTLEY
17502 Armstrong Ave.
Irvine, CA 92714
AREA CODE/PHONE NUMBER 714/546-8020

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD009627411
~~CAD009627278~~

TRANSPORTER NO 1
OMEGA CHEMICAL CORP.
12504 E.Whittier Blvd.
Whittier CA 90602

VEH/CONTAINER NO. 42507
EPA ID NUMBER C AD 0 4 2 245 0 01

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO
EPA ID NUMBER

TREATMENT STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER C AD 0 4 2 245 0 01

AREA CODE/PHONE NUMBER 213/698-0991

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO	CONTAINER TYPES	WASTE CAT NO	DISP METH
Hazardous Waste, Liquid NOS - ORM-E ~~(FLUOROSOLV TF)~~	NA 9189		P	36	DM	211	01

COMPONENTS	CONC RANGE UPPER	LOWER	UNITS %	PPM
TRICHLOROTRIFLUOROETHANE	99	95	%	
WATER	5	1	%	

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature: KEN ROEBEL Kenneth Roebel — MO 07 DAY 26 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature: Henry Solomon — DATE REC'D & ACCEPTED MO 07 DAY 26 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES
Printed or typed full name and signature — DATE REC'D & ACCEPTED MO DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature: STEVE SIMPSON

EPA ID NUMBER C AD 0 4 2 245 0 01

DATE RECEIVED & ACCEPTED MO 07 DAY 26 YR 84

FORM NO DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

State of California—Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714-744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

July 25, 1984

Department of Health Services

P.O. # R-202

Please print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83493865

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
AMERICAN BENTLEY
17502 Armstrong Ave.
Irvine, CA 92714

AREA CODE/PHONE NUMBER 714/546-8020

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER
CAD009627411
~~CAD009626278~~

TRANSPORTER NO 1
OMEGA CHEMICAL CORP.
12504 E.Whittier Blvd.
Whittier CA 90602

VEH./CONTAINER NO | EPA ID NUMBER
C AD 0 4 2 245 0 01

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH./CONTAINER NO 42507 | EPA ID NUMBER

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA CHEMICAL CORP.

EPA ID NUMBER
C AD 0 4 2 245 0 01

AREA CODE/PHONE NUMBER 213/698-0991

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN NA NUMBER	TOTAL QUANTITY	UNIT WT./VOL.	CONTAINER NO.	CONTAINER TYPE	WASTE CAT. NO.	DISP. METH.
Hazardous Waste, Liquid NOS - ORM-E (FLUOROSOLV TF)	NA 9 1 89		P	36	DM	211	01

COMPONENTS	CONC RANGE UPPER	LOWER	UNITS %	PPM
TRICHLOROTRIFLUOROETHANE	99	95	%	
WATER	5	1	%	

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature: KEN ROEBEL Kenneth Roebel

MO. 07 DAY 26 YR 84

☐ Check if continuation sheet is used. Number of continuation sheets

TO BE FILLED IN BY TRANSPORTER

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature: Henry Solomon

DATE REC'D & ACCEPTED MO. 07 DAY 26 YR 84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE REC'D & ACCEPTED MO. DAY YR

TO BE FILLED IN BY TSDF

DISCREPANCY INDICATION SPACE

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature: STEVE SIMPSON

EPA ID NUMBER C AD 0 4 2 245 0 01

DATE RECEIVED & ACCEPTED MO. 07 DAY 26 YR 84

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

83-87967

Revised Manifest Summary Report

IRISH CONSTRUCTION
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
12/21/1989		88676082		417	LBS		CMP		
12/05/1990		88681518		583.8	LBS		CMP		
02/22/1991		88681777		917.4	LBS		CMP		
05/20/1991		88684858		1334.4	LBS		CMP		
07/03/1991		88346420		792.3	LBS		CMP		

Total Records: 5 Default Volume: 0 Total Waste Volume: 2.0225

Revised Manifest Summary Report

BENTLEY LABORATORIES INC
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
		83376140		2752.2	LBS		CMP		
		87162010		0	LBS		CMP		
		87162030		11008.8	LBS		CMP		
		87162035		12384.9	LBS		CMP		
		84277697		9591	LBS		CMP		
		84341380		6672	LBS		CMP		
		86057862		2502	LBS		CMP		
		86057865		1584.6	LBS		CMP		
09/28/1978		87162032		6421.8	LBS		CMP		
01/11/1983		8270922		9600	LBS		CMP		
02/18/1983		83029528		24325.85	LBS		CMP		
02/25/1983		83029651		7205.76	LBS		CMP		
04/14/1983		83029768		11040	LBS		CMP		
04/19/1983		83029758		11040	LBS		CMP		
05/04/1983		83029799		11040	LBS		CMP		
05/13/1983		83029815		11040	LBS		CMP		
06/03/1983		83029887		11040	LBS		CMP		
07/15/1983		83212284		11040	LBS		CMP		
07/28/1983		83212271		7339.2	LBS		CMP		
08/11/1983		83212229		7339.2	LBS		CMP		
09/09/1983		83212339		11040	LBS		CMP		
09/19/1983		83212349		11040	LBS		CMP		
10/14/1983		83376146		11040	LBS		CMP		
10/24/1983		83376174		7339.2	LBS		CMP		
07/27/1984		83049589		9174	LBS		CMP		
08/06/1984		83049593		9174	LBS		CMP		
08/22/1984		83677643		7339.2	LBS		CMP		
09/20/1984		83677654		7339.2	LBS		CMP		
10/05/1984		83677655		7339.2	LBS		CMP		
10/19/1984		83677662		5504.4	LBS		CMP		
11/15/1984		83677669		13761	LBS		CMP		
01/03/1985		83677668		11467.5	LBS		CMP		
01/24/1985		83677683		11008.8	LBS		CMP		
06/19/1985		84418718		6421.8	LBS		CMP		
06/20/1985		84418720		3544.5	LBS		CMP		
07/29/1985		84277604		7339.2	LBS		CMP		
07/29/1985		84277605		15595.8	LBS		CMP		
08/19/1985		84277606		15637.5	LBS		CMP		

Revised Manifest Summary Report

BENTLEY LABORATORIES INC
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
09/13/1985		84277608		11008.8	LBS		CMP		
10/18/1985		84277607		9174	LBS		CMP		
01/13/1986		84277616		8798.7	LBS		CMP		
02/27/1986		84277624		7797.9	LBS		CMP		
03/05/1986		84277622		11592.6	LBS		CMP		
04/09/1986		84277629		9174	LBS		CMP		
04/23/1986		84277628		16513.2	LBS		CMP		
04/28/1986		84277632		3210.9	LBS		CMP		
05/07/1986		84277631		11676	LBS		CMP		
06/04/1986		84277635		8715.3	LBS		CMP		
06/06/1986		84277633		9632.7	LBS		CMP		
06/20/1986		84277637		7797.9	LBS		CMP		
07/17/1986		84277630		17889.3	LBS		CMP		
07/29/1986		84277647		12843.6	LBS		CMP		
08/13/1986		84277646		6880.5	LBS		CMP		
08/14/1986		84277638		6880.5	LBS		CMP		
08/18/1986		86534541		2085	LBS		CMP		
09/03/1986		84277650		18348	LBS		CMP		
09/11/1986		84277651		5004	LBS		CMP		
09/18/1986		86534542		10008	LBS		CMP		
09/23/1986		84277652		3336	LBS		CMP		
10/01/1986		84277653		12510	LBS		CMP		
11/05/1986		84277698		6672	LBS		CMP		
04/01/1987		86057867		4170	LBS		CMP		
05/13/1987		87162001		11259	LBS		CMP		
05/20/1987		87162002		7923	LBS		CMP		
05/27/1987		87162003		4587	LBS		CMP		
05/28/1987		87162005		4662.06	LBS		CMP		
06/03/1987		87162007		7506	LBS		CMP		
06/10/1987		87162008		5004	LBS		CMP		
06/17/1987		87162009		8757	LBS		CMP		
07/02/1987		87162013		7506	LBS		CMP		
07/07/1987		87162012		3961.5	LBS		CMP		
07/15/1987		87162015		7089	LBS		CMP		
07/22/1987		87162016		5504.4	LBS		CMP		
07/24/1987		87162017		8340	LBS		CMP		
07/29/1987		87162018		6672	LBS		CMP		
08/06/1987		87162019		9174	LBS		CMP		

Revised Manifest Summary Report

BENTLEY LABORATORIES INC
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
08/07/1987		87162020		3336	LBS		CMP		
08/12/1987		87162021		8757	LBS		CMP		
08/24/1987		87162022		17931	LBS		CMP		
08/26/1987		87162023		4587	LBS		CMP		
08/28/1987		87162024		3753	LBS		CMP		
09/03/1987		87162026		11259	LBS		CMP		
09/09/1987		87162027		5004	LBS		CMP		
09/16/1987		87162028		6255	LBS		CMP		
10/09/1987		87162033		17847.6	LBS		CMP		
10/22/1987		87162034		5838	LBS		CMP		
11/11/1987		87162037		18348	LBS		CMP		
11/11/1987		87162038		3336	LBS		CMP		
11/18/1987		87162039		22800	LBS		CMP		
11/18/1987		87162040		2752.2	LBS		CMP		
12/02/1987		87162042		17430.6	LBS		CMP		
12/09/1987		87162100		15012	LBS		CMP		
12/16/1987		87162044		17889.3	LBS		CMP		
12/17/1987		87162041		1834.8	LBS		CMP		
12/30/1987		87162045		1834.8	LBS		CMP		
12/30/1987		87162047		458.7	LBS		CMP		
12/30/1987		87162048		19182	LBS		CMP		
01/13/1988		87162050		18806.7	LBS		CMP		
01/20/1988		87162051		20182.8	LBS		CMP		
01/21/1988		87162049		3210.9	LBS		CMP		
01/27/1988		87162052		18806.7	LBS		CMP		
02/04/1988		87162054		16054.5	LBS		CMP		
02/10/1988		87162055		18348	LBS		CMP		
02/17/1988		87162056		17430.6	LBS		CMP		
02/17/1988		87162057		7339.2	LBS		CMP		
02/17/1988		87162053		3377.7	LBS		CMP		
03/03/1988		87162099		19724.1	LBS		CMP		
03/09/1988		87162059		1834.8	LBS		CMP		
03/09/1988		87162060		18806.7	LBS		CMP		
03/16/1988		87162061		19724.1	LBS		CMP		
03/16/1988		87162062		7339.2	LBS		CMP		
03/16/1988		87162063		4587	LBS		CMP		
03/25/1988		87162064		19724.1	LBS		CMP		
03/30/1988		87162067		2293.5	LBS		CMP		

Revised Manifest Summary Report

BENTLEY LABORATORIES INC
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
03/30/1988		87162068		19724.1	LBS		CMP		
04/06/1988		87162070		19724.1	LBS		CMP		
04/11/1988		87162071		19724.1	LBS		CMP		
04/14/1988		87162073		16513.2	LBS		CMP		
04/18/1988		87162069		2293.5	LBS		CMP		
04/21/1988		87162075		19724.1	LBS		CMP		
04/28/1988		87162076		18348	LBS		CMP		
05/16/1988		87162079		18348	LBS		CMP		
05/18/1988		87162080		10550.1	LBS		CMP		
05/26/1988		87162081		18348	LBS		CMP		
06/02/1988		87162082		22518	LBS		CMP		
06/02/1988		87162074		834	LBS		CMP		
06/03/1988		87824956		5963.1	LBS		CMP		
06/06/1988		87162083		9174	LBS		CMP		
06/14/1988		87162084		20182.8	LBS		CMP		
06/16/1988		87162085		17889.3	LBS		CMP		
06/22/1988		87162086		16513.2	LBS		CMP		
06/29/1988		87162087		18348	LBS		CMP		
06/29/1988		87162088		2293.5	LBS		CMP		
06/30/1988		87162089		18348	LBS		CMP		
07/06/1988		87162090		18348	LBS		CMP		
07/07/1988		87162091		18348	LBS		CMP		
07/12/1988		87162196		5504.4	LBS		CMP		
07/20/1988		87162198		5504.4	LBS		CMP		
08/09/1988		87162098		1834.8	LBS		CMP		
08/18/1988		87162096		1501.2	LBS		CMP		

Total Records: 140 Default Volume: 0 Total Waste Volume: 717.5875

Revised Manifest Summary Report

AMERICAN BENTLEY LABS
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
03/25/1983		83029736		7339.2	LBS		CMP		
05/11/1983		83029818		7339.2	LBS		CMP		
03/05/1985		84341364		8715.3	LBS		CMP		
05/03/1985		84341368		11467.5	LBS		CMP		

Total Records: 4 Default Volume: 0 Total Waste Volume: 17.4306

Revised Manifest Summary Report

TRAVENOL LABORATORIES
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
10/30/1989		89529049		400	LBS		CMP		

Total Records: 1 Default Volume: 0 Total Waste Volume: .2

Revised Manifest Summary Report

BAXTER HEALTHCARE CORP
BAXTER / BENTLEY LABS

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
04/10/1989		88254437		917.4	LBS		CMP		
06/09/1989		88255664		2752.2	LBS		CMP		
06/12/1989		88255691		917.4	LBS		CMP		
06/23/1989		88255583		458.7	LBS		CMP		
09/21/1989		88258039		458.7	LBS		CMP		
11/09/1989		89658494		250.2	LBS		CMP		

Total Records: 6 Default Volume: 0 Total Waste Volume: 2.8773