State of California Health and Welfare Agency
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street
Sacramento, CA 95814

See attached 4.7

UNIFORM HAZARDOUS WASTE MANIFEST

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

TO BE FILLED IN BY THE GENERATOR

GENERATOR NAME AND MAILING ADDRESS
CHAMPION LABEL
957 N. Eckhoff St. Orange, CA. 92667

STATE ID NUMBER 8270936
MANIFEST DOCUMENT NUMBER
EPA ID NUMBER CAX000047079
Small generator

AREA CODE/PHONE NUMBER

TRANSPORTER NO. 1
Omega Chemical Corp.
L2504 E. Whittier Blvd., Whittier, CA.

VEH./CONTAINER NO.

EPA ID NUMBER CA DO 42245001

TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

EPA ID NUMBER

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

EPA ID NUMBER CAD042284500

AREA CODE/PHONE NUMBER

PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS	UN/NA NUMBER	TOTAL QUANTITY	UNIT WT/VOL	CONTAINER NO.	TYPE	WASTE CAT. NO.
Hazardous Waste Liquid N.O.S (FLEXOSOLVENT) ORM-E	N A 9189	60	G	2	DM	21

COMPONENTS	CONC. UPPER	RANGE LOWER	UNITS %	UNITS ppm
REPC MCLORETHYLE				
BUTYL ALCH.				
PHOTO POLY. RESIN				

SPECIAL HANDLING INSTRUCTIONS

Hazardous Waste Management Branch
MAR 0 3 1983
California Department of Health Services
SACRAMENTO

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 Jon A Willer MO. 01 DAY 13 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 Wonder Jr. MO. 01 DAY 13 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
spilled 31.7 gm.
waste 14.3 "

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 DO 42245001 MO. 01 DAY 12 YR. 83

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

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

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

STATE ID NUMBER 83301649

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
Shamrock Scientific
957 No. Eckhoff St.
Orange Calif 92667
AREA CODE/PHONE NUMBER

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD980880660
~~SEQUENCE NUMBER~~

TRANSPORTER NO. 1
CJW Chemicals
1328 Willow St
Los Angeles Ca 90013

VEH./CONTAINER NO. 43058
EPA ID NUMBER CAZ038DM CAD0148147849

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

TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY
OMEGA Chemical
12504 E. Whittier Blvd.
Whittier Calif 90602
AREA CODE/PHONE NUMBER
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.
Waste ORM-A NOS	UA1693	30	GAL	1	DM	212	011

COMPONENTS	CONC. RANGE UPPER	CONC. RANGE LOWER	UNITS %	UNITS PPM
ORM-A Solvent	80	85	X	
Oil	15	10	X	

SPECIAL HANDLING INSTRUCTIONS
Gloves

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.
Joe Quintarella
Printed or typed full name and signature
MO 05 DAY 11 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
JOE TURNER
Printed or typed full name and signature
DATE REC'D & ACCEPTED MO 05 DAY 11 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.
Omega Chemical
Tim Baltierra
Printed or typed full name and signature
EPA ID NUMBER CAD042245001
DATE RECEIVED & ACCEPTED MO 05 DAY 12 YR 84

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS

06/13/2001 "ORIGINAL MANIFEST COPY"

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

04/23/84

Department of Health Services

UNIFORM HAZARDOUS WASTE MANIFEST

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

STATE ID NUMBER 83494141

TO BE FILLED IN BY GENERATOR

GENERATOR NAME AND MAILING ADDRESS
SHAMROCK OF CALIFORNIA
957 N. ECKHOFF ST.
ORANGE, CA. 93667
AREA CODE/PHONE NUMBER 714/639-5444 John

S 112

01883

MANIFEST DOCUMENT NUMBER
EPA ID NUMBER
CAD980880660

TRANSPORTER NO 1
OMEGA CHEMICAL CORP
12504 E. WHITTIER BLVD.
WHITTIER, CALIF. 90602

VEH/CONTAINER NO: 00042507
EPA ID NUMBER: CAD042245001

TRANSPORTER NO 2/ALTERNATE TSD FACILITY

VEH/CONTAINER NO
EPA ID NUMBER

TREATMENT STORAGE, OR DISPOSAL (TSDI FACILITY
OMEGA CHEMICAL CORP
12504 E. WHITTIER BLVD.
WHITTIER, CALIF. 90602
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	1/150	[illegible]	3	DM	211	01

COMPONENTS	CONC RANGE UPPER	CONC RANGE LOWER	UNITS %	UNITS PPM
PERCHLOROETHYLENEE	90	80		
N-BUTYL ALCOHOL	10	20		
PHOTO RESINS	5	10		

SPECIAL HANDLING INSTRUCTIONS
Waste 156 GALS.

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.

MO DAY YR

Printed or typed full name and signature Harry A Hilbert

☐ 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 4 DAY 24 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.

EPA ID NUMBER CAD042245001

DATE RECEIVED & ACCEPTED MO. 05 DAY 01 YR 84

STEVE SIMPSON
Printed or typed full name and signature

ORM 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: CAD 980880660
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
SHAMROCK SCIENTIFIC
957 N. ECKHOFF ORANGE CA 92667

4. Generator's Phone (714) 639-5444

5. Transporter 1 Company Name: EMERA CHEMICAL CORP
6. US EPA ID Number: CAD 0422 45001

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

9. Designated Facility Name and Site Address
EMERA CHEMICAL CORP
12554 E WHITTIER BLD
WHITTIER CA 90601
10. US EPA ID Number: CAD 422 45001

A. State Manifest Document Number: 84341899
B. State Generator's ID: CAD 880 CAD980880660
C. State Transporter's ID: 701 737
D. Transporter's Phone: 213-698-0991
E. State Transporter's ID
F. Transporter's Phone
G. State Facility's ID: CAD 0422 45001
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 NOS UN9189 ORM-E	2		110 gal		
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
INK CELLO-SOLVENTS
ALCOHOLS - NORMAL - ISO PROPAL
RESINS - WATER BASED INKS

K. Handling Codes for Wastes Listed Above
d99

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: TOM HITEMAN
Signature: [signature]
Date: Month 4 Day 17 Year 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: ISAAC WOODS JR
Signature: [signature]
Date: Month 4 Day 17 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: STEVEN SIMPSON
Signature: [signature]
Date: Month 04 Day 17 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 60541

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.: CAD980880660
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
Shamrock Scientific
957 N. Eckhoff St. Orange, CA 92667

4. Generator's Phone (714) 639-5444

A. State Manifest Document Number: 84341900
B. State Generator's ID: CAD980880660
C. State Transporter's ID: 701737
D. Transporter's Phone: (213) 698-0991
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID: CAD0422 45001
H. Facility's Phone: (213) 698-0991

5. Transporter 1 Company Name: Omega Chemical Corp.
6. US EPA ID Number: CAD0422 45001

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: CAD422 45001

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 NOS NA9189 ORM-E	3		165 gal.		
b.					
c					
d.					

J. Additional Descriptions for Materials Listed Above
Ink cello - solvents
alcohols - normal - isopropyl
resins - water based inks

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

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.

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: Tom Hitzman
Signature: [signature]
Date: Month Day Year 9 12 5 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Isaac Woods Jr
Signature: [signature]
Date: Month Day Year 9 12 5 86

18. Transporter 2 Acknowledgement or 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: [signature]
Date: Month Day Year 9 12 5 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 89541

05/31/2001 "ORIGINAL MANIFEST COPY"

Shipper 14778

State of California—Health and Welfare Agency

January 3, 1986

C

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. CAD980880660 — 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
Shamrock Scientific (Tom Hitzman)
957 N. Eckhoff, Orange, CA 92667

4. Generator's Phone (714) 639-5444

A. State Manifest Document Number: 84583159

B. State Generator's ID: CAD980880660

5. Transporter 1 Company Name: Omega Recovery Services

6. US EPA ID Number: CAD042245001

C. State Transporter's ID: 62569

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

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. Waste ORM-A N.O.S. (Flexosolvent) ORM-A NA 1693	003	DM	90 GAL	G	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
Methylene Chloride and Butanol
Photo Resin

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: Tom Hitzman — Signature: Tom Hitzman — Date (Month Day Year): 1 1 7 86

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Isaac Woods Jr — Signature: Isaac Woods Jr — Date (Month Day Year): 10 10 7 86

18. Transporter 2 Acknowledgement or 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 Day Year): 10 10 7 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 89541

05/31/2001 "ORIGINAL MANIFEST COPY"

Shipper 16325

June 27, 1986

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. CAD980880660 — 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
Shamrock Scientific
957 No. Eckhoff, Orenge, CA 92667

4. Generator's Phone (714) 639-5444

A. State Manifest Document Number: 86534465

B. State Generator's ID: CAD980880660

5. Transporter 1 Company Name: Omega Recovery Services

6. US EPA ID Number: CAD042245011

C. State Transporter's ID

D. Transporter's Phone: 213/698-09

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: 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 N.O.S. NA 1693 ORM-A (Flexosolvent)	003	DM	90 Gal.	G	211
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above
PERCHLOROETHYLENE & BUTANOL
PHOTO RESIN

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 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.

Printed/Typed Name: Tom Hitzman — Signature: Tom Hitzman — Month Day Year: 06 30 86

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: N. JAY Solomon. — Signature: N. Jay Solomon — Month Day Year: 06 30 86

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: STEVEN SIMPSON — Signature: Steve Simpson — Month Day Year: 06 30 86

GENERATOR — TRANSPORTER — FACILITY

86534465

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

05/31/2001 "ORIGINAL MANIFEST COPY"

State of California—Health and Welfare Agency
Form Approved OMB No. 2060—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. CAD 980 880 860 — Manifest Document No. 45207

2. Page 1 of

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

3. Generator's Name and Mailing Address
SHAMROCK SCIENTIFIC
957 NO. ECKHOFF ST.,ORANGE, CA 92667

4. Generator's Phone (714) 639-5444

A. State Manifest Document Number 88345407

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 203450

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 9400H 274STG01

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 9188 (WASTE INK, ETHYL ALCOHOL,BUTYL CELLOSOLVE,WATER, INK,DIRT,OIL)	0 DF	DM	01100	G	State 212 EPA/Other F003
b. WASTE ORM-A N.O.S ORM-A NA 1693 (FLEXOSOLVENT) (PERCHLOROETHYLENE,N-BUTANOL)	0012	DM	00040	G	State 211,212 EPA/Other F001,F003
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
A,B FOR DISPOSAL

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

15. Special Handling Instructions and Additional Information
PROFILE NUMBERS B 10107,10108

EMERGENCY CONTACT PHONE NUMBER 714 639-5444

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: Robert Toalston — Signature: Robert Toalston — Month Day Year 11/12/91

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: JAVIER HERNANDEZ — Signature: Javier Hernandez — Month Day Year 11/12/91

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 Hatta — Signature — Month Day Year 11/12/91

Do Not Write Below This Line

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

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

GENERATOR

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

88345407

0000 0000 0916 002

03/29/2000 "ORIGINAL MANIFEST COPY"

Revised Manifest Summary Report

SHAMROCK SCIENTIFIC
Shamrock Scientific Specialty Systems, Inc.

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
		83494141		1376.1	LBS		CMP		
		87118790		1417.8	LBS		CMP		
01/13/1983		8270930		500.4	LBS		CMP		
07/11/1983		83029987		750.6	LBS		CMP		
01/31/1984		83494192		750.6	LBS		CMP		
05/11/1984		83301649		250.2	LBS		CMP		
10/18/1984		83564193		1000.8	LBS		CMP		
12/27/1984		84341203		1376.1	LBS		CMP		
07/09/1985		84341566		1080	LBS		CMP		
10/11/1985		84341897		1376.1	LBS		CMP		
01/07/1986		84583159		1376.1	LBS		CMP		
04/17/1986		84341899		0	LBS		CMP		
06/30/1986		86534465		1376.1	LBS		CMP		
09/25/1986		84341900		0	LBS		CMP		
12/16/1986		86544013		1000.8	LBS		CMP		
01/30/1987		84341907		917.4	LBS		CMP		
08/07/1987		87114259		2001.6	LBS		CMP		
12/03/1987		87119509		1167.6	LBS		CMP		
12/05/1988		87119447		1167.6	LBS		CMP		
05/16/1989		88677375		917.4	LBS		CMP		
08/11/1989		88614703		708.9	LBS		CMP		
01/12/1990		88676093		1167.6	LBS		CMP		
04/06/1990		88683437		458.7	LBS		CMP		
07/02/1990		88677128		708.9	LBS		CMP		
10/22/1990		88615552		834	LBS		CMP		
05/09/1991		88684828		110	LBS		CMP		
11/27/1991		88345407		1167.6	LBS		CMP		

Total Records: 27 Default Volume: 0 Total Waste Volume: 12.4795

generator_name	SHAMROCK SCIENTIFIC
lc_name:	Shamrock Scientific Specialty Systems, Inc.
lc_calc_volume:	12.4795 tons

manifest_number	manifest_quantity_ton
08270930	0.2502 tons
83029987	0.3753 tons
83301649	0.1251 tons
83494141	0.68805 tons
83494192	0.3753 tons
83564193	0.5004 tons
84341203	0.68805 tons
84341566	0.54 tons
84341897	0.68805 tons
84341899	0 tons
84341900	0 tons
84341907	0.4587 tons
84583159	0.68805 tons
86534465	0.68805 tons
86544013	0.5004 tons
87114259	1.0008 tons
87118790	0.7089 tons
87119447	0.5838 tons
87119509	0.5838 tons
88345407	0.5838 tons
88614703	0.35445 tons
88615552	0.417 tons
88676093	0.5838 tons
88677128	0.35445 tons
88677375	0.4587 tons
88683437	0.22935 tons

88684828	0.055 tons