CUSTOMER/ACCT. NO

240120

WORK ORDER NO.

13216
14216

BILLING ADDRESS
DOUGLAS AIRCRAFT
190TH & NORMANDIE
TORRANCE CA

SERVICE ADDRESS
SAME

ORDER DATE	DATE TO BE DONE	CUSTOMER P.O. #	ORDERED BY	TELEPHONE#	CONTACT PERSON
05/02/95	05/03/95		FRED IT	(0) 0 0	

REP.	DIV. #	DEPARTMENT	CUSTOMER'S EPA #	CUSTOMER'S BD OF EQUAL #	CONTACT PHONE #
PMG	516500	TRANSPORTATION		(	0) 0 0

P/UP 2X20 ROLL/OFF BINS HAUL TO IV FOR DISPOSAL ON SITE 0800

DEL 1x20 CLOSED TOP.

DRIVER COMPLETE:

SERVICES PERFORMED Deliver Bin # R1844ML
To Job site.

START TIME 0700 STOP TIME ____ START MILES 414489 END MILES ____ TRUCK NUMBER 16051 TRAILER NUMBER ____

Manifest Number n/A Date Completed 5/3/95 Drivers Name John Ribeiro

Comments ____

In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to reasonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

Customer Signature [signature] 5-03-95

PRICING INSTRUCTIONS - DRUMS

Clerical _____ Hrs. @ _____ Per Hr. _____

Project Manager _____ Hrs. @ _____ Per Hr. _____

First Technician _____ Hrs. @ _____ Per Hr. _____

Second Technician _____ Hrs. @ _____ Per Hr. _____

Third Technician _____ Hrs. @ _____ Per Hr. _____

Fourth Technician _____ Hrs. @ _____ Per Hr. _____

Fifth Technician _____ Hrs. @ _____ Per Hr. _____

Truck # _____ Hrs. @ _____ Per Hr. _____

Truck # _____ Hrs. @ _____ Per Hr. _____

Truck # _____ Hrs. @ _____ Per Hr. _____

Sundays, Holidays, and After Hours @ _____ % = _____

TRANSPORTATION & DISPOSAL FEES TO TSD FACILITY

_____ 5 Gal. Cans Liquid @ _____ Each _____

_____ 5 Gal. Cans Solid @ _____ Each _____

_____ 5 Gal. Cans Lab Packed @ _____ Each _____

_____ 55 Gal. Drums Liquid @ _____ Each _____

_____ 55 Gal. Drums Solid @ _____ Each _____

_____ 55 Gal. Drums Lab Packed _____ Each _____

_____ Empty 5 Gal. Cans @ _____ Each _____

_____ Empty 55 Gal. Cans @ _____ Each _____

County Tax _____ _____

MATERIALS USED

_____ 5 Gal. Cans @ _____ Each _____

_____ 55 Gal. Drums @ _____ Each _____

_____ Recovery Drums @ _____ Each _____

_____ Bags Vermiculite @ _____ Each _____

_____ Bags (Other Describe) @ _____ @ _____ = _____

_____ Hazardous Waste Labels @ _____ Each _____

_____ Drum Liners @ _____ Each _____

Safety Equipment Number of Sets _____ @ _____ = _____

PRICING INSTRUCTIONS - PUMPING

Compensation _____ Hrs. @ _____ Per Hr. _____

Washout Fee _____

Dump Fee _____

TOTAL _____