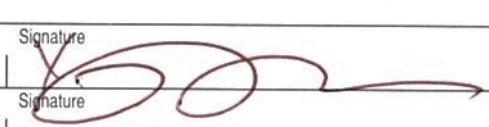
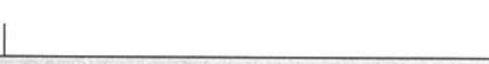
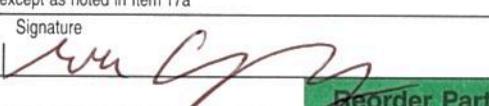


Please print or type.

(Form designed for use on elite (12-pitch) typewriter.)

| | | | | | | | |
|--|--|--|---|--|---|-------|------|
| GENERATOR | NON-HAZARDOUS WASTE MANIFEST | 1. Generator ID Number N / A | 2. Page 1 of 1 | 3. Emergency Response Phone 717-587-7850 | 4. Waste Tracking Number 0 7 2 2 2 5 U S A - F A | | |
| | 5. Generator's Name and Mailing Address US Army Reserve 4603 Camden Ave Parkersburg WV 26101 | Attn: Ray Chain Generator's Site Address (if different than mailing address) | | | | | |
| | Generator's Phone: 484 576-0856 | | | | | | |
| | 6. Transporter 1 Company Name Fratello & Amico, Inc. | U.S. EPA ID Number | | | | | |
| | 7. Transporter 2 Company Name | U.S. EPA ID Number | | | | | |
| | 8. Designated Facility Name and Site Address GemChem, Inc. 53 North Cedar Street Littitz PA 17543 | U.S. EPA ID Number | | | | | |
| | Facility's Phone: 717 626-3800 | P A D 0 0 9 4 3 9 6 8 2 | | | | | |
| | 9. Waste Shipping Name and Description | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | | |
| | 1. Non-Regulated Material, N.O.S. (Oily Debris/Sludge) | No. | Type | 07 07 | DM 3,500 P | | |
| | 2. | | | | | | |
| | 3. | | | | | | |
| | 4. | | | | | | |
| | 13. Special Handling Instructions and Additional Information Non-RCRA/Non-DOT Regulated Waste Contact: Ray Chain, Fratello & Amico | | | | | | |
| | 14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste. | | | | | | |
| | Generator/Officer's Printed/Typed Name RAY Chain | Signature | | Month | Day | Year | |
| | 15. International Shipments | <input type="checkbox"/> Import to U.S. | <input type="checkbox"/> Export from U.S. | Port of entry/exit: Date leaving U.S.: | | | |
| | Transporter Signature (for exports only): |  | | | | | |
| | 16. Transporter Acknowledgment of Receipt of Materials | Signature | | | | Month | Day |
| Transporter 1 Printed/Typed Name RAY Chain |  | | | | 07 | 22 | 25 |
| Transporter 2 Printed/Typed Name | Signature | | | | Month | Day | Year |
| 17. Discrepancy | | | | | | | |
| 17a. Discrepancy Indication Space | <input type="checkbox"/> Quantity | <input type="checkbox"/> Type | <input type="checkbox"/> Residue | <input type="checkbox"/> Partial Rejection | <input type="checkbox"/> Full Rejection | | |
| Manifest Reference Number: | | | | | | | |
| 17b. Alternate Facility (or Generator) | U.S. EPA ID Number | | | | | | |
| Facility's Phone: | | | | | | | |
| 17c. Signature of Alternate Facility (or Generator) | Month Day Year | | | | | | |
|  | | | | | | | |
| 18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a | | | | | | | |
| Printed/Typed Name Candy Young | Signature | | Month | Day | Year | | |
|  | | | | | | | |