Northern Utilities, Inc. - New Hampshire Division
Allocation of Environmental Insurance Recoveries

ERC Recovery Allocation

	Allocation %	Recovery Amount	% of Recovery Total	Resolution Fee	% of Resolution Fee
Recovery Total		$ -			
Dispute Resolution Fee				**$0.00**	**0.0%**
Massachusetts					
MGP Sites	100.00%	**$0.00**		**$0.00**	
Shareholder	50.00%	$0.00		$0.00	
Ratepayer	50.00%	$0.00		$0.00	
Non - MGP	0.00%	$0.00		$0.00	
Total	**50.00%**	**$0.00**	**0.0%**	**$0.00**	**0.0%**
New Hampshire					
MGP Sites	0.00%	**$0.00**		**$0.00**	
Ratepayer	100.00%	$0.00		$0.00	
Non - MGP	0.00%	$0.00		$0.00	
Total		**$0.00**	**0.0%**	**$0.00**	**0.0%**
Maine					
Shareholder	50.00%	$0.00		$0.00	
Ratepayer	50.00%	$0.00		$0.00	
Total		**$0.00**	**0.0%**	**$0.00**	**0.0%**

Northern Utilities, Inc. - New Hampshire Division
Allocation of Environmental Insurance Recoveries

ERC Recovery Allocation

	Allocation %	Recovery Amount	% of Recovery Total	Resolution Fee	% of Resolution Fee
Recovery Total		$ -			
Dispute Resolution Fee				**$0.00**	**0.0%**
Massachusetts					
MGP Sites	0.00%	**$0.00**		**$0.00**	
Shareholder	0.00%	$0.00		$0.00	
Ratepayer	0.00%	$0.00		$0.00	
Non - MGP	0.00%	$0.00		$0.00	
Total		**$0.00**	**0.0%**	**$0.00**	**0.0%**
New Hampshire					
MGP Sites	0.00%	**$0.00**		**$0.00**	
	0.00%				
Ratepayer	0.00%	$0.00		$0.00	
Non - MGP	0.00%	$0.00		$0.00	
Total		**$0.00**	**0.0%**	**$0.00**	**0.0%**
Maine					
Shareholder	50.00%	$0.00		$0.00	
Ratepayer	50.00%	$0.00		$0.00	
Total		**$0.00**	**0.0%**	**$0.00**	**0.0%**

Northern Utilities, Inc.- New Hampshire Division
2010-2011 ENVIRONMENTAL RESPONSE COSTS

			Allocation Amount		
			59.6%	40.4%	0.0%
Vendor Name	Invoice #	**Total Invoice**	**NH**	**ME**	**MA**
		$0.00	$0.00	$0.00	$0.00
Total		$0.00	$0.00	$0.00	$0.00

Total Insurance Expense **$0.00**

Total Insurance Recovery $0.00

GATHERUM

12,148.93

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 16-JUL-10
Invoice Number: 37038764

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731 **Project Name : 13046001 EXETER SEDIMENT INVESTIGATION**
Bill Through Date : 01-MAY-10 to 02-JUL-10

Task Number : 0100 **Task Name : SEDIMENT INVESTIGATI**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Hartman, Kaitlin N	P11	02-JUL-10	3.50	92.50	323.75
McCarthy, Ryan S	P14	02-JUL-10	4.00	115.00	460.00
Total Labor Bill Rate			**7.50**		**783.75**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Supplies	McCabe, Mark M	30-APR-10	EXP816859	71.08	1.0800	76.77
Total Reimbursable				**71.08**		**76.77**

Task Total : SEDIMENT INVESTIGATI **860.52**

Task Number : 0300 **Task Name : STORM SEWER INVESTIG**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	11-JUN-10	6.00	190.00	1,140.00
McCabe, Mark M	P20	18-JUN-10	1.00	190.00	190.00
McCabe, Mark M	P20	02-JUL-10	4.00	190.00	760.00
McCarthy, Ryan S	P14	11-JUN-10	3.00	115.00	345.00
McCarthy, Ryan S	P14	18-JUN-10	1.50	115.00	172.50
McCarthy, Ryan S	P14	25-JUN-10	1.50	115.00	172.50
Total Labor Bill Rate			**17.00**		**2,780.00**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Supplies	McCarthy, Ryan S	09-JUN-10	EXP818817	14.71	1.0800	15.89
Total Reimbursable				**14.71**		**15.89**

Task Total : STORM SEWER INVESTIG **2,795.89**

Task Number : 0400 **Task Name : REPORTING**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	25-JUN-10	20.00	190.00	3,800.00
McCabe, Mark M	P20	02-JUL-10	11.00	190.00	2,090.00

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Warren, Laura A	P15	25-JUN-10	3.00	125.00	375.00
Warren, Laura A	P15	02-JUL-10	5.00	125.00	625.00
Total Labor Bill Rate			**39.00**		**6,890.00**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Mileage	Warren, Laura A	21-JUN-10	EXP900023	52.00	1.0800	56.16
Mileage	Warren, Laura A	29-JUN-10	EXP902763	58.00	1.0800	62.64
Postage & Shipping	US ACM ZERO AP	24-JUN-10	FEDEXINVOICE71	18.29	1.0000	18.29
Travel Alt Other	Warren, Laura A	21-JUN-10	EXP900023	1.06	1.0800	1.14
Total Reimbursable			**129.35**			**138.23**

Task Total : REPORTING **7,028.23**

Task Number : 0900 **Task Name : MEETINGS & PROJ.MGMT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Hartman, Kaitlin N	P11	07-MAY-10	0.50	92.50	46.25
Hartman, Kaitlin N	P11	11-JUN-10	3.50	92.50	323.75
McCarthy, Ryan S	P14	07-MAY-10	0.50	115.00	57.50
McCarthy, Ryan S	P14	28-MAY-10	2.50	115.00	287.50
Rodriguez, Deanna L	P12	07-MAY-10	0.50	97.50	48.75
Total Labor Bill Rate			**7.50**		**763.75**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Lunch	McCarthy, Ryan S	30-APR-10	EXP757701	24.99	1.0800	26.99
Total Reimbursable				**24.99**		**26.99**

Task Total : MEETINGS & PROJ.MGMT **790.74**

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	673.05
Total Lump Sum	**673.05**

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION **12,148.43**

Invoice Summaries

Total Current Amount :	12,148.43
Retention Amount :	0.00
Pre-Tax Amount :	12,148.43
Tax Amount :	0.00
Total Invoice Amount :	**12,148.43**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	12,148.43	129,211.78	141,360.21		
Billing Total :	12,148.43	129,211.78	141,360.21		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37038764	16-JUL-10	12,148.43
Outstanding Total :		12,148.43

30-40-00-00-188-29-00
OK PE
7/23/10
NU-NH

AECOM PA Invoice Billing Backup - Labor

Customer Name: UNITIL SERVICES CORPORATON
Invoice Number: 37038764
Invoice Date: 01-MAY-10 to 02-JUL-10
Project: 60139731 13046001 EXETER SEDIMENT INVESTIGAT
Task: 0100 SEDIMENT INVESTIGATI

Employee Name/Job Title	Job Title/Expenditure	Expdt	Hours	Cost	Raw Cost	Rate	Billed Amt
Hartman, Kaitlin N	P11	02-JUL-10	3.50			92.5000	323.75
McCarthy, Ryan S	P14	02-JUL-10	4.00			115.0000	460.00
Total for Task: 0100			7.50				783.75

Task: 0300 STORM SEWER INVESTIG

Employee Name/Job Title	Job Title/Expenditure	Expdt	Hours	Cost	Raw Cost	Rate	Billed Amt
McCabe, Mark M	P20	11-JUN-10	6.00			190.0000	1,140.00
McCabe, Mark M	P20	18-JUN-10	1.00			190.0000	190.00
McCabe, Mark M	P20	02-JUL-10	4.00			190.0000	760.00
McCarthy, Ryan S	P14	11-JUN-10	3.00			115.0000	345.00
McCarthy, Ryan S	P14	18-JUN-10	1.50			115.0000	172.50
McCarthy, Ryan S	P14	25-JUN-10	1.50			115.0000	172.50
Total for Task: 0300			17.00				2,780.00

Task: 0400 REPORTING

Employee Name/Job Title	Job Title/Expenditure	Expdt	Hours	Cost	Raw Cost	Rate	Billed Amt
McCabe, Mark M	P20	25-JUN-10	20.00			190.0000	3,800.00
McCabe, Mark M	P20	02-JUL-10	11.00			190.0000	2,090.00
Warren, Laura A	P15	25-JUN-10	3.00			125.0000	375.00
Warren, Laura A	P15	02-JUL-10	5.00			125.0000	625.00
Total for Task: 0400			39.00				6,890.00

Task: 0900 MEETINGS & PROJ.MGMT

Employee Name/Job Title	Job Title/Expenditure	Expdt	Hours	Cost	Raw Cost	Rate	Billed Amt
Hartman, Kaitlin N	P11	07-MAY-10	0.50			92.5000	46.25
Hartman, Kaitlin N	P11	11-JUN-10	3.50			92.5000	323.75
McCarthy, Ryan S	P14	07-MAY-10	0.50			115.0000	57.50
McCarthy, Ryan S	P14	28-MAY-10	2.50			115.0000	287.50
Rodriguez, Deanna L	P12	07-MAY-10	0.50			97.5000	48.75
Total for Task: 0900			7.50				763.75
Project Invoice Total: 60139731			71.00				11,217.50

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	01-MAY-10 - 07-MAY-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	Hartman, Kaitlin N
Employee Number	:	652558

Project	Task	Type	SAT 01-MAY	SUN 02-MAY	MON 03-MAY	TUE 04-MAY	WED 05-MAY	THUR 06-MAY	FRI 07-MAY	Total
60139731 13046001 EXETER SEDIMENT I	0900 MEETINGS & PROJ.MGMT	OT Straight Time Hrs	0.00	0.00	0.00	0.00	0.00	0.00	0.50	0.50
		Total :	0.00	0.00	0.00	0.00	0.00	0.00	0.50	0.50

Hartman, Kaitlin N
Employee Signature

Approver For Employee Signature

McCarthy, Ryan S
Approver Signature

Total Regular Hours:	0.00
Total Overtime Hours:	0.50
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	05-JUN-10 - 11-JUN-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	Hartman, Kaitlin N
Employee Number	:	652558

Project	Task	Type	SAT 05-JUN	SUN 06-JUN	MON 07-JUN	TUE 08-JUN	WED 09-JUN	THUR 10-JUN	FRI 11-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0900 MEETINGS & PROJ.MGMT	Regular Hrs	0.00	0.00	0.00	0.00	3.50	0.00	0.00	3.50
		Total :	0.00	0.00	0.00	0.00	3.50	0.00	0.00	3.50

Hartman, Kaitlin N
Employee Signature

Approver For Employee Signature

McCarthy, Ryan S
Approver Signature

Total Regular Hours:	3.50
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period : 26-JUN-10 - 02-JUL-10
Organization : 41.US EM.USWES1.5827
Assignment Category : A - Full Time
Employee Category : Exempt

Employee Name : Hartman, Kaitlin N
Employee Number : 652558

Project	Task	Type	SAT 26-JUN	SUN 27-JUN	MON 28-JUN	TUE 29-JUN	WED 30-JUN	THUR 01-JUL	FRI 02-JUL	Total
60139731 13046001 EXETER SEDIMENT I	0100 SEDIMENT INVESTIGATI	Regular Hrs	0.00	0.00	0.00	0.00	3.50	0.00	0.00	3.50
		Total :	0.00	0.00	0.00	0.00	3.50	0.00	0.00	3.50

Hartman, Kaitlin N
Employee Signature

Approver For Employee Signature

McCarthy, Ryan S
Approver Signature

Total Regular Hours: 3.50
Total Overtime Hours: 0.00
Total Non-Worked Hours: 0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	01-MAY-10 - 07-MAY-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	McCarthy, Ryan S
Employee Number	:	648137

Project	Task	Type	SAT 01-MAY	SUN 02-MAY	MON 03-MAY	TUE 04-MAY	WED 05-MAY	THUR 06-MAY	FRI 07-MAY	Total
60139731 13046001 EXETER SEDIMENT I	0900 MEETINGS & PROJ.MGMT	Regular Hrs	0.00	0.00	0.00	0.00	0.50	0.00	0.00	0.50
		Total :	0.00	0.00	0.00	0.00	0.50	0.00	0.00	0.50

McCarthy, Ryan S
Employee Signature

Approver For Employee Signature

Greenblatt, Marcia S
Approver Signature

Total Regular Hours:	0.50
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	05-JUN-10 - 11-JUN-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	McCarthy, Ryan S
Employee Number	:	648137

Project	Task	Type	SAT 05-JUN	SUN 06-JUN	MON 07-JUN	TUE 08-JUN	WED 09-JUN	THUR 10-JUN	FRI 11-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0300 STORM SEWER INVESTIG	Regular Hrs	0.00	0.00	0.00	0.50	2.00	0.50	0.00	3.00
		Total :	0.00	0.00	0.00	0.50	2.00	0.50	0.00	3.00

McCarthy, Ryan S
Employee Signature

Approver For Employee Signature

Kennedy, Matthew J
Approver Signature

Total Regular Hours:	3.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	12-JUN-10 - 18-JUN-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	McCarthy, Ryan S
Employee Number	:	648137

Project	Task	Type		SAT 12-JUN	SUN 13-JUN	MON 14-JUN	TUE 15-JUN	WED 16-JUN	THUR 17-JUN	FRI 18-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0300 STORM SEWER INVESTIG	Regular Hrs		0.00	0.00	0.00	0.00	0.00	0.00	1.50	1.50
			Total :	0.00	0.00	0.00	0.00	0.00	0.00	1.50	1.50

McCarthy, Ryan S
Employee Signature

Approver For Employee Signature

Greenblatt, Marcia S
Approver Signature

Total Regular Hours:	1.50
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	19-JUN-10 - 25-JUN-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	McCarthy, Ryan S
Employee Number	:	648137

Project	Task	Type	SAT 19-JUN	SUN 20-JUN	MON 21-JUN	TUE 22-JUN	WED 23-JUN	THUR 24-JUN	FRI 25-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0300 STORM SEWER INVESTIG	Regular Hrs	0.00	0.00	0.00	0.00	0.00	0.00	1.50	1.50
		Total :	0.00	0.00	0.00	0.00	0.00	0.00	1.50	1.50

McCarthy, Ryan S
Employee Signature

Approver For Employee Signature

Greenblatt, Marcia S
Approver Signature

Total Regular Hours:	1.50
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	22-MAY-10 - 28-MAY-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	McCarthy, Ryan S
Employee Number	:	648137

Project	Task	Type	SAT 22-MAY	SUN 23-MAY	MON 24-MAY	TUE 25-MAY	WED 26-MAY	THUR 27-MAY	FRI 28-MAY	Total
60139731 13046001 EXETER SEDIMENT I	0900 MEETINGS & PROJ.MGMT	Regular Hrs	0.00	0.00	0.00	0.00	0.00	2.50	0.00	2.50
		Total :	0.00	0.00	0.00	0.00	0.00	2.50	0.00	2.50

McCarthy, Ryan S
Employee Signature

Approver For Employee Signature

Greenblatt, Marcia S
Approver Signature

Total Regular Hours:	2.50
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	26-JUN-10 - 02-JUL-10
Organization	:	41.US EM.USWES1.5827
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	McCarthy, Ryan S
Employee Number	:	648137

Project	Task	Type	SAT 26-JUN	SUN 27-JUN	MON 28-JUN	TUE 29-JUN	WED 30-JUN	THUR 01-JUL	FRI 02-JUL	Total
60139731 13046001 EXETER SEDIMENT I	0100 SEDIMENT INVESTIGATI	Regular Hrs	0.00	0.00	0.00	0.00	4.00	0.00	0.00	4.00
		Total :	0.00	0.00	0.00	0.00	4.00	0.00	0.00	4.00

McCarthy, Ryan S
Employee Signature

Approver For Employee Signature

Kennedy, Matthew J
Approver Signature

Total Regular Hours:	4.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	05-JUN-10 - 11-JUN-10
Organization	:	41.US EM.USWES1.5803
Assignment Category	:	P - PT Fixed - 30 Hrs
Employee Category	:	Non Exempt
Employee Name	:	McCabe, Mark M
Employee Number	:	648678

Project	Task	Type	SAT 05-JUN	SUN 06-JUN	MON 07-JUN	TUE 08-JUN	WED 09-JUN	THUR 10-JUN	FRI 11-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0300 STORM SEWER INVESTIG	Regular Hrs	0.00	0.00	0.00	0.00	6.00	0.00	0.00	6.00
		Total :	0.00	0.00	0.00	0.00	6.00	0.00	0.00	6.00

McCabe, Mark M
Employee Signature

Approver For Employee Signature

Kelmar, Laura A
Approver Signature

Total Regular Hours:	6.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	12-JUN-10 - 18-JUN-10
Organization	:	41.US EM.USWES1.5803
Assignment Category	:	P - PT Fixed - 30 Hrs
Employee Category	:	Non Exempt
Employee Name	:	McCabe, Mark M
Employee Number	:	648678

Project	Task	Type		SAT 12-JUN	SUN 13-JUN	MON 14-JUN	TUE 15-JUN	WED 16-JUN	THUR 17-JUN	FRI 18-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0300 STORM SEWER INVESTIG	Regular Hrs		0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00
			Total :	0.00	0.00	1.00	0.00	0.00	0.00	0.00	1.00

McCabe, Mark M

Employee Signature

Approver For Employee Signature

Kelmar, Laura A

Approver Signature

Total Regular Hours:	1.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	19-JUN-10 - 25-JUN-10
Organization	:	41.US EM.USWES1.5803
Assignment Category	:	P - PT Fixed - 30 Hrs
Employee Category	:	Non Exempt
Employee Name	:	McCabe, Mark M
Employee Number	:	648678

Project	Task	Type	SAT 19-JUN	SUN 20-JUN	MON 21-JUN	TUE 22-JUN	WED 23-JUN	THUR 24-JUN	FRI 25-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0400 REPORTING	Regular Hrs	0.00	0.00	4.00	4.00	6.00	2.00	4.00	20.00
		Total :	0.00	0.00	4.00	4.00	6.00	2.00	4.00	20.00

McCabe, Mark M
Employee Signature

Approver For Employee Signature

Atter, Steven S
Approver Signature

Total Regular Hours:	20.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	26-JUN-10 - 02-JUL-10
Organization	:	41.US EM.USWES1.5803
Assignment Category	:	P - PT Fixed - 30 Hrs
Employee Category	:	Non Exempt
Employee Name	:	McCabe, Mark M
Employee Number	:	648678

Project	Task	Type		SAT 26-JUN	SUN 27-JUN	MON 28-JUN	TUE 29-JUN	WED 30-JUN	THUR 01-JUL	FRI 02-JUL	Total
60139731 13046001 EXETER SEDIMENT I	0300 STORM SEWER INVESTIG	Regular Hrs		0.00	0.00	0.00	4.00	0.00	0.00	0.00	4.00
60139731 13046001 EXETER SEDIMENT I	0400 REPORTING	Regular Hrs		0.00	0.00	2.00	4.00	2.00	3.00	0.00	11.00
			Total :	0.00	0.00	2.00	8.00	2.00	3.00	0.00	15.00

McCabe, Mark M
Employee Signature

Approver For Employee Signature

Mitchell, Christopher B
Approver Signature

Total Regular Hours:	15.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	19-JUN-10 - 25-JUN-10
Organization	:	41.US EM.USWES1.5803
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	Warren, Laura A
Employee Number	:	648802

Project	Task	Type	SAT 19-JUN	SUN 20-JUN	MON 21-JUN	TUE 22-JUN	WED 23-JUN	THUR 24-JUN	FRI 25-JUN	Total
60139731 13046001 EXETER SEDIMENT I	0400 REPORTING	Regular Hrs	0.00	0.00	3.00	0.00	0.00	0.00	0.00	3.00
		Total :	0.00	0.00	3.00	0.00	0.00	0.00	0.00	3.00

Warren, Laura A
Employee Signature

Approver For Employee Signature

Gardner, Michael J (Mike)
Approver Signature

Total Regular Hours:	3.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	26-JUN-10 - 02-JUL-10
Organization	:	41.US EM.USWES1.5803
Assignment Category	:	A - Full Time
Employee Category	:	Exempt
Employee Name	:	Warren, Laura A
Employee Number	:	648802

Project	Task	Type	SAT 26-JUN	SUN 27-JUN	MON 28-JUN	TUE 29-JUN	WED 30-JUN	THUR 01-JUL	FRI 02-JUL	Total
60139731 13046001 EXETER SEDIMENT I	0400 REPORTING	Regular Hrs	0.00	0.00	0.00	4.00	0.00	1.00	0.00	5.00
		Total :	0.00	0.00	0.00	4.00	0.00	1.00	0.00	5.00

Warren, Laura A
Employee Signature

Approver For Employee Signature

Gardner, Michael J (Mike)
Approver Signature

Total Regular Hours:	5.00
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM Technology Corporation
Employee Timesheet

AECOM

Timecard Period	:	01-MAY-10 - 07-MAY-10
Organization	:	41.US EM.USWES1.5803
Assignment Category	:	A - Full Time
Employee Category	:	Non Exempt
Employee Name	:	Rodriguez, Deanna L
Employee Number	:	648736

Project	Task	Type	SAT 01-MAY	SUN 02-MAY	MON 03-MAY	TUE 04-MAY	WED 05-MAY	THUR 06-MAY	FRI 07-MAY	Total
60139731 13046001 EXETER SEDIMENT I	0900 MEETINGS & PROJ.MGMT	Regular Hrs	0.00	0.00	0.00	0.00	0.00	0.00	0.50	0.50
		Total :	0.00	0.00	0.00	0.00	0.00	0.00	0.50	0.50

Rodriguez, Deanna L
Employee Signature

Approver For Employee Signature

Mitchell, Christopher B
Approver Signature

Total Regular Hours:	0.50
Total Overtime Hours:	0.00
Total Non-Worked Hours:	0.00

AECOM PA Invoice Billing Backup - NonLabor

Customer Name: UNITIL SERVICES CORPORATON
Invoice Number: 37038764
Invoice Date: 01-MAY-10 to 02-JUL-10
Project: 60139731 13046001 EXETER SEDIMENT INVESTIGAT

Task: 0100 SEDIMENT INVESTIGATI
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
McCabe, Mark M	Supplies	30-APR-10	EXP816859	851535382	19.95	1.080	21.55
McCabe, Mark M	Supplies	30-APR-10	EXP816859	851535382	51.13	1.080	55.22
Category Total :					71.08		76.77
Total for Task: 0100					71.08		76.77

Task: 0300 STORM SEWER INVESTIG
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
McCarthy, Ryan S	Supplies	09-JUN-10	EXP818817	851537431	14.71	1.080	15.89
Category Total :					14.71		15.89
Total for Task: 0300					14.71		15.89

Task: 0400 REPORTING
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
US ACM ZERO AP	Postage & Shipping	24-JUN-10	FEDEXINVOICE712	851546381	18.29	1.000	18.29
Warren, Laura A	Mileage	21-JUN-10	EXP900023	851551619	26.00	1.080	28.08
Warren, Laura A	Mileage	21-JUN-10	EXP900023	851551619	26.00	1.080	28.08
Warren, Laura A	Travel All Other	21-JUN-10	EXP900023	851551619	0.53	1.080	0.57
Warren, Laura A	Travel All Other	21-JUN-10	EXP900023	851551619	0.53	1.080	0.57
Warren, Laura A	Mileage	29-JUN-10	EXP902763	851555332	58.00	1.080	62.64
Category Total :					129.35		138.23
Total for Task: 0400					129.35		138.23

Task: 0900 MEETINGS & PROJ.MGMT
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
McCarthy, Ryan S	Lunch	30-APR-10	EXP757701	851485287	24.99	1.080	26.99
Category Total :					24.99		26.99
Total for Task: 0900					24.99		26.99

Project Invoice Total:	60139731	240.13	257.88

Confirmation

Expense report number EXP816859 for 71.08 has been submitted to Kelmar, Laura A for approval.

Expense Report EXP816859

Hint:Use your browser navigation to exit the printable page view of this page.

Submission Instructions

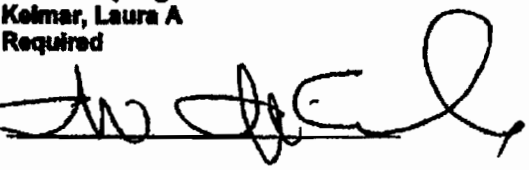
To complete the expense report submission process, you must:
– Print and sign the confirmation page. (Please note the page must be in landscape mode).
– Print and sign the iExpense Excel worksheet (if you used the Excel import method).
– Tape original receipts to an 8-1/2x11 sheet of plain white paper to support your claim for reimbursement.
– Staple all pages together and send to the Accounts Payable department attached to a transmittal sheet (unless otherwise instructed by your supervisor).

Your electronic expense report will be submitted to your direct manager for approval. If your manager does not take action within 7 days the expense report will be escalated to his/her manager. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the Track Submitted Expense Reports region.

After the expense report is approved, the AP Department will receive an approval notification in Oracle. AP Department will audit the paper receipts, verify the amount approved by the manager, and approve the expense report for payment.

General Information

Name	McCabe, Mark M (648678)	Report Submit Date	17-JUN-2010
Expense Dates	08-MAR-2010 - 30-APR-2010	Attachments	View
Cost Center	5803	Report Total	71.08 USD
Purpose	Field Sampling	Reimbursement Amount	71.08 USD
Approver	Kelmar, Laura A		
Receipts Status	Required		

AECOM
Employee Signature 

Expense Details Weekly Summary Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Curr. Rate	Expense Type	Justification	Project Number	Task Number	Reimbursable Amount (USD)	Guest's Name	Title
08-Mar-2010	51.13 USD	1	MISC-Miscellaneous	sampling supplies	60139731	0100	51.13		
30-Apr-2010	19.95 USD	1	MISC-Miscellaneous	sampling supplies	60139731	0100	19.95		
						Total	71.08		

Expense Details Weekly Summary Approval Notes [0]

mcCabe 648678 030810 60139781.100

Project #
Client
Site
Subject

Page of
Date
By
App.

AECOM

Sampling supplies

More saving.
More doing.

85 MAIN STREET
TEWKSBURY, MA 01876 (978)640-0400

2668 00002 96673 03/08/10 12:34 PM
CASHIER [illegible]

0989450518 1 1X12X4 NO.2 <A>
686.98 41
0306991408 3 [illegible] <A> 6 [illegible]

SUBTOTAL [illegible]
SALES TAX [illegible]
TOTAL [illegible] 13

XXXXXXXXX [illegible] AMEX
AUTH CODE [illegible]

2668 02 [illegible]

RETURN POLI[illegible]
POLICY ID DA[illegible]
A [illegible]

THE HOME [illegible]

51.13

Sampling supplies

THANK YOU FOR SHOPPING AT
ARJAY ACE HARDWARE
55 LINCOLN STREET
EXETER, N.H. 03833-3213
(603) 772-6054

WE OFFER DUMPSTER SERVICE IN 6..15..AND
[illegible]YDS..FOR STORM & SPRING CLEAN UP...
[illegible]0/10 10:12AM TR 554 SALE

55108	5	EA	3.99 EA	N
SHACKLE SCR PIN 1/4"GALV			19.95	

SUB-TOTAL: 19.95 TAX:
TOTAL: 19.95
CASH TEND: 20.00 CHANGE: .05

19.95

==>> JRNL#F02748 <<==
CUST # *5

Confirmation

Expense report number EXP818817 for 328.85 has been submitted to Greenblatt, Marcia S for approval.

Expense Report EXP818817

Hint:Use your browser navigation to exit the printable page view of this page.

Submission Instructions

To complete the expense report submission process, you must:
-- Print and sign the confirmation page. (Please note the page must be in landscape mode).
-- Print and sign the iExpense Excel worksheet (if you used the Excel import method).
-- Tape original receipts to an 8-1/2x11 sheet of plain white paper to support your claim for reimbursement.
-- Staple all pages together and send to the Accounts Payable department attached to a transmittal sheet (unless otherwise instructed by your supervisor).

Your electronic expense report will be submitted to your direct manager for approval. If your manager does not take action within 7 days the expense report will be escalated to his/her manager. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the Track Submitted Expense Reports region.

After the expense report is approved, the AP Department will receive an approval notification in Oracle.
AP Department will audit the paper receipts, verify the amount approved by the manager, and approve the expense report for payment.

General Information

Name	McCarthy, Ryan S (648137)
Expense Dates	09-JUN-2010 - 17-JUN-2010
Cost Center	5827
Purpose	Project Expenses
Approver	Greenblatt, Marcia S
Receipts Status	Required

Report Submit Date	17-JUN-2010
Attachments	View
Report Total	328.85 USD
Reimbursement Amount	328.85 USD

AECOM
Employee Signature _____

Expense Details | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Curr.	Rate	Expense Type	Justification	Project Number	Task Number	Reimbursable Amount (USD)	Guest's Name	Title	Organization Name	Business Purpose	Merchant Name	Expense Location	Attachments	Receipt Required	Receipt Missing	Details	Country
09-Jun-2010	14.71 USD		1	MISC-Miscellaneous	Field Supplies	60139731	0300	14.71											
09-Jun-2010	6.90 USD		1	TRA-Lunch	Lunch	60145108	21	6.90											
14-Jun-2010	61.69 USD		1	TRA-Car Rental	Field Expenses	60150693	401	61.69								✔			
14-Jun-2010	19.44 USD		1	TRA-Lunch	Field Expenses	60150693	401	19.44											
14-Jun-2010	35.93 USD		1	TRA-Travel All Other	Field Expenses	60150693	401	35.93								✔			
16-Jun-2010	140.83 USD		1	TRA-Car Rental	Meeting Expenses	60150693	200	140.83								✔			

AECOM

EMPLOYEE EXPENSE REPORT

Employee No.	648137	Reimbursement Currency	USD-US Dollar
Employee Name	Ryan McCarthy	Business Purpose	Project Expenses

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shaded area - Protected or Selection
c. If the Area below reads ERROR please contact s

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	9-Jun-2010	60139731	0300	Field Supplies	YES	USD	1.0000				0.500	0.00								
2	9-Jun-2010	60145108	21	Lunch	YES	USD	1.0000				0.500	0.00							6.90	
3	14-Jun-2010	60150693	401	Field Expenses	YES	USD	1.0000				0.500	0.00		61.69					19.44	
4	16-Jun-2010	60150693	200	Meeting Expenses	YES	USD	1.0000				0.500	0.00		140.83					1.58	
5	17-Jun-2010	60150693	200	Meeting Expenses	YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										0		0.00	0.00	202.52	0.00	0.00	0.00	0.00	27.92	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature		Supervisor Approval	

AECOM

EMPLOYEE EXPENSE REPORT

he AIMS Help Desk / (866) 823-AIMS

Employee No. 648137

Employee Name Ryan McCarthy

Line No.	Total Meals (Excluding Alcohol)	Other							Total	Business Meetings			
		Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount		Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						MISC-Miscellaneous	14.71	14.71				
2	6.90						Select Expenditure Type		6.90				
3	19.44						TRA-Travel All Other	35.93	117.06				
4	1.58						TRA-Travel All Other	24.43	166.84				
5	0.00						TRA-Travel All Other	23.34	28.34				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	27.92	0.00	0.00	0.00	0.00	0.00		96.41	328.85				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

OLIVA'S MARKET
83-85 EAST MAIN STREET
MILFORD MA 01757
508-473-7928

Merchant ID: 518564980184788
Term ID: 4788

Sale

VISA
XXXXXXXXXXXX2936
Entry Method: Swiped
Apprvd: Online   Batch#: 000004
0?/09/10   10:21:34
Inv #: 000002 Appr Code: 092250
Total: $ 6.90

Customer Copy
THANK YOU
FOR VISITING

OCEAN PIZZA
30 TAFTVILLE OCCUM ROAD
NORWICH, CT 06380
PHONE #(860) 822-8647

Server ID: 1

Sale

XXXXXXXXXXXX8539
VISA   Entry Method: Swiped
Amount: $ 12.86
Tip:
Total: 15.00
06/14/10   12:43:06
Inv#: 000007   Appr Code: 070690
Apprvd: Online   Batch#: 000043

---

150 PORTSMOUTH AVE
EXETER NH 03867

EXETER 66
150 PORTSMOUTH AVE
EXETER , NH

06/14/2010 9:25:29 PM
INVOICE 152303
THANK YOU
GAL   13.026
PRICE/GAL $ 2.899
FUEL TOTAL $35.93
Total = $36.93
Credit $35.93

Stop&Shop

STOP & SHOP #204
EXETER, NH
603-772-6013
WWW.STOPANDSHOP.COM

EZ SHOPPER #3   1:00pm 6/09/10
Tran 22043 Terminal 14 Cashier 00433
Customer Card Number 1203362896

EDGBRK DNR SPNS	5.99
LS STEAM PAN ME	0.69
LS STEAM PAN ME	0.59
LS STEAM PAN ME	0.59
LS STEAM PAN ME	0.59
LS STEAM PAN ME	0.59
LS STEAM PAN ME	0.59
BRWNY BRL PRINT	2.19
KTCHN & VEG BRSH	2.99
Total	$14.71
Credit Card	$14.71
Subtotal	$14.71
Total	$14.71
Change	$0.00

****CARD REWARDS****
ID 1203362896
MILK REWARDS

Points Earned during this visit   0
Current Total for this Program   0

****

THANK YOU FOR SHOPPING AT STOP & SHOP.
WE'VE ENJOYED SERVING YOU, AND WE
LOOK FORWARD TO SERVING ALL YOUR
FUTURE SHOPPING NEEDS.

PAUL MURPHY, STORE MANAGER
STOP & SHOP #204

R:\Shared\AP ZERO UPLOADS\2010 JUNE\Fedex invoice 712483660.xls

Item	Fedex charge	8.67	04115894	1	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	10.10	04115914	1	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	10.90	04115915	1	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	9.14	04136801	1	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	11.21	04801853	0001	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	6.21	60132959	102	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	12.67	60133146	500	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	5.42	60136875	6000	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	7.29	60137361	100	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	7.29	60137361	100	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	27.89	60138702	100	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	18.29	60139731	0400	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	8.67	60143048	01.02	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	6.68	60143048	06.03.01	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	5.30	60146910	004	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	5.30	60146910	004	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	8.67	60147130	999	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	5.42	60147593	010	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	12.63	60147901	200	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	10.31	60147948	003	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	30.42	60148386	100	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	9.22	60149296	1	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	11.72	60150507	0100	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	17.09	60155456	312	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	7.29	60156917	1	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	.6.30	60156532	1	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	23.38	60158128	0004	OFF-Postage & Shipping	24-Jun-2010
Item	Fedex charge	-1,276.44	04115806	1	OFF-Postage & Shipping	24-Jun-2010

Prepared By:Mary Clover _____

Approved By: _____

6/24/2010 4:09 PM

ORACLE

Confirmation

Expense report number EXP900023 for 53.06 has been submitted to Gardner, Michael J (Mike) for approval.

Expense Report EXP900023

Return | Create New Expense Report | Printable Page

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	**Warren, Laura A (648802)**	Report Submit Date	**28-JUN-2010**
Expense Dates	**21-JUN-2010 - 21-JUN-2010**	Attachments	View Add
Cost Center (DEPT)	**5803**	Report Total	**53.06 USD**
Detailed Business Purpose	**Site Visit**	Reimbursement Amount	**53.06 USD**
Approver	**Gardner, Michael J (Mike)**		
Receipts Status	**Not Required**		

ACM
Signature _____

I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECO

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

						Reimbursable

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Amount (USD)	Guest's Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
21-Jun-2010	26.00 USD	TRA-Mileage	Site Visit						26.00					
21-Jun-2010	0.53 USD	TRA-Travel All Other	Site Visit						0.53					
21-Jun-2010	26.00 USD	TRA-Mileage	Site Visit						26.00					
21-Jun-2010	0.53 USD	TRA-Travel All Other	Site Visit						0.53					
								Total	53.06					

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Return | Create New Expense Report | Printable Page

AECOM

EMPLOYEE EXPENSE REPORT

Employee No. 648602
Employee Name Laura Warren

Reimbursement Currency USD-US Dollar
Business Purpose Site Visit

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact th

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	21-Jun-2010	60139731	0400	Site Visit	YES	USD	1.0000	Westford	Portsmouth	52	0.500	26.00								
2	21-Jun-2010	60139731	0400	Site Visit	YES	USD	1.0000	Portsmouth	Westford	52	0.500	26.00								
3					YES	USD	1.0000				0.500	0.00								
4					YES	USD	1.0000				0.500	0.00								
5					YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										104		52.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

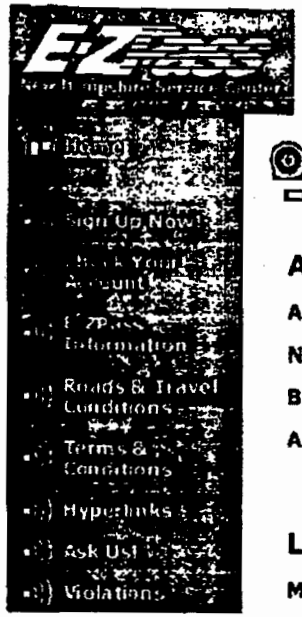
ie AIMS Help Desk / (866) 823-AIMS

Employee No. 646802

Employee Name Laura Warren

Line No.	Total Meals (Excluding Alcohol)	Other							Total	Business Meetings			
		Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount		Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						TRA-Travel All Other	0.53	26.53				
2	0.00						TRA-Travel All Other	0.53	26.53				
3	0.00						Select Expenditure Type		0.00				
4	0.00						Select Expenditure Type		0.00				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	0.00	0.00	0.00	0.00	0.00	0.00		1.06	53.06				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00



Account Information | Account History | Update Personal Information | Vehicle/Transponder Maintenance | Logout

Account Balance | Last Replenishment | One-Time Payment | Latest Tolls

Account Balance

Account Noo: 27119378
Name: WARREN, LAURA A.
Balance: $34.65
Account Status: GOOD

Last Replenishment

Method: AMEX
Amount: $30.00
Credit Card No: **********1008
Date: 08-May-2010 01:19:05

Address

Type: MAILING
Street 1: 5 NEEDHAM STREET
Street 2:
City: NORTH CHELMSFORD
State: MA
Zip Code: 01863 -
Country: USA
Day Phone: (978)371-1422 Ext. 129
Evening Phone: (978)251-1064
Email Address: lwarren@retec.com

Latest Tolls (last 3 transactions)

Transaction Date	Transponder	Entry Plaza	Entry Lane	Exit Plaza	Exit Lane	Status	Toll
21-Jun-2010 16:55:53	02600180531	-	-	Hampton Ramp	S3	ETOL	$.53
21-Jun-2010 15:12:21	02600180531	-	-	Hampton Ramp	N2	ETOL	$.53
20-May-2010 18:36:51	02600180531	-	-	Bedford	S5	ETOL	$.70

ORACLE Expense Reports

Confirmation

Expense report number EXP902763 for 58.00 has been submitted to Gardner, Michael J (Mike) for approval.

Expense Report EXP902763

Return Create New Expense Report Printable Page

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	**Warren, Laura A (648802)**	Report Submit Date	**30-JUN-2010**
Expense Dates	**29-JUN-2010 - 29-JUN-2010**	Attachments	**None** Add
Cost Center (DEPT)	**5803**	Report Total	**58.00 USD**
Detailed Business Purpose	**Site Visit**	Reimbursement Amount	**58.00 USD**
Approver	**Gardner, Michael J (Mike)**		
Receipts Status	**Not Required**		

ACM
Signature _____

I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECO

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Reimbursable

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
29-Jun-2010	58.00 USD	TRA-Mileage	Site Visit			✔			58.00					
								Total	58.00					

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Return | Create New Expense Report | Printable Page

Expenses | Contact Us | Home | Logout | Preferences

Privacy Statement

AECOM

EMPLOYEE EXPENSE REPORT

Employee No. 848802
Employee Name Laura Warren

Reimbursement Currency: USD-US Dollar
Business Purpose: Site Visit

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact th

	Descriptions							Daily Itinerary		Personal Auto			Transportation				Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	29-Jun-2010	60139731	0400	Site Visit	NO	USD	1.0000	Chelmsford-Exeter	Exeter-Westford	116	0.500	58.00								
2					YES	USD	1.0000				0.500	0.00								
3					YES	USD	1.0000				0.500	0.00								
4					YES	USD	1.0000				0.500	0.00								
5					YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										116		58.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

ıs AIMS Help Desk / (866) 823-AIMS

Employee No. 646802

Employee Name Laura Warren

Line No.	Total Meals (Excluding Alcohol)	Other							Total	Business Meetings			
		Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount		Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						Select Expenditure Type		58.00				
2	0.00						Select Expenditure Type		0.00				
3	0.00						Select Expenditure Type		0.00				
4	0.00						Select Expenditure Type		0.00				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	0.00	0.00	0.00	0.00	0.00	0.00		0.00	58.00				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

Confirmation

Expense report number EXP757701 for 45.81 has been submitted to Greenblatt, Marcia S for approval.

Expense Report EXP757701

Hint: Use your browser navigation to exit the printable page view of this page.

Submission Instructions

To complete the expense report submission process, you must:
-- Print and sign the confirmation page. (Please note the page must be in landscape mode).
-- Print and sign the iExpense Excel worksheet (if you used the Excel Import method).
-- Tape original receipts to an 8-1/2x11 sheet of plain white paper to support your claim for reimbursement.
-- Staple all pages together and send to the Accounts Payable department attached to a transmittal sheet (unless otherwise instructed by your supervisor).

Your electronic expense report will be submitted to your direct manager for approval. If your manager does not take action within 7 days the expense report will be escalated to his/her manager. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the Track Submitted Expense Reports region.

After the expense report is approved, the AP Department will receive an approval notification in Oracle.
AP Department will audit the paper receipts, verify the amount approved by the manager, and approve the expense report for payment.

General Information

Name McCarthy, Ryan S (546137)
Expense Dates 30-APR-2010 - 17-MAY-2010
Cost Center 6827
Purpose Expenses
Approver Greenblatt, Marcia S
Receipts Status Not Required

Report Submit Date 18-MAY-2010
Attachments View
Report Total 45.81 USD
Reimbursement Amount 45.81 USD

AECOM
Employee Signature _____

Expense Details | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Curr.	Expense Rate Type	Justification	Project Number	Task Number	Reimbursable Amount (USD)	Guest's Name	Title	Organization Name	Business Purpose	Merchant Name	Expense Location	Attachments	Receipt Required	Receipt Missing	Details	Country
30-Apr-2010	24.99	USD	1 TRA-Lunch	Meals	60139731	0900	24.99							✚			■	
04-May-2010	7.53	USD	1 TRA-Lunch	Meals	60146106	21	7.53							✚			■	
06-May-2010	1.79	USD	1 MISC-Miscellaneous	Supplies	60137060	200	1.79							✚			■	
17-May-2010	11.50	USD	1 TRA-Mileage	Med. Monitoring	04115827	1	11.50							✚			■	
						Total	45.81											

Expense Details | Weekly Summary | Approval Notes [0]

AECOM

EMPLOYEE EXPENSE REPORT

Employee No. 548137

Employee Name Ryan McCarthy

Reimbursement Currency USD-US Dollar

Business Purpose

User Name cannot commingle ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste cannot commingle (do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shaded area - Protected or Selection
c. If this does before mode ERROR please contact th

Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	Daily Mileage From	To	# Of Miles	Personal Auto Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Taxes, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	30-Apr-2010	60136731	0900	Meals	YES	USD	1.0000				0.500	0.00							24.99	
2	4-May-2010	60146108	21	Meals	YES	USD	1.0000				0.500	0.00							7.53	
3	6-May-2010	60137060	200	Supplies	YES	USD	1.0000				0.500	0.00								
4	17-May-2010	04116827	1	Mid Monitoring	YES	USD	1.0000	Westford	Ayer	23	0.500	11.50								
5					YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										23		11.50	0.00	0.00	0.00	0.00	0.00	0.00	32.52	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

to AMS Help Desk / (866) 823-4888

Employee No.	648137
Employee Name	Ryan McCarthy

		Other								Business Meetings			
Line No.	Total Meals (Including Alcohol)	Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount	Total	Guests Name	Guests Title	Organizations Name	Business Purpose
1	32.52						Select Expenditure Type		32.52				
2	7.88						Select Expenditure Type		7.88				
3	0.00						Select Expenditure Type	1.79	1.79				
4	0.00						Select Expenditure Type		11.62				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	32.52	0.00	0.00	0.00	0.00	0.00		1.79	45.81				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

Cumberland Farms
188 LITTLETON ROAD
WESTFORD MA, 01886
3508-2408

ORIGINAL
Receipt 2089652

Qty	Name	Price	Total
1	BAG OF ICE	1.79	1.79

Subtotal 1.79

Total 1.79

Total 1.79

[illegible] 1.79

[illegible] 200000000001002 SWIPED
[illegible] 586044 Seq#202882
REF 202882

05/06/2010 10:26:48 A Pos:2 Cashier:102

Questions or Comments Please Call
(800) 554-6280

****
Any Size
Hot Beverage
$.99
****

1.79

OLIVA'S MARKET
83-85 EAST MAIN STREET
MILFORD MA 01757
508-473-7528

Merchant ID: 900184788
Term ID: 0420

Sale

VISA
XXXXXXXXXXX8599
Entry Method: Swiped
Approved: Online Batch#: 000004
05/04/10 13:06:41

Inv#: 00000020 Appr Code: 017798

Total: $ 7.53

Customer Copy

THANK YOU
FOR VISITING

7.53

MC & OLLIES
54 WATER STREET
EXETER NH 03833
603-772-4600

[illegible] ID. 000000230[illegible]
[illegible] ID: 00164582 Ref : [illegible]

Sale

[illegible]

Entry Method: Swiped

[illegible] : $ 3.75

04/30/10 09:11:50
Inv #: 000018 Appr Code: 001149
Approved Online Batch#: 000374

Customer Copy

3.75

Las Olas Taqueria

DATE: 04/30/2010 TIME: 11:34:23 AM
CASHIER ID: 00

I agree to pay the above total amount according to the card issuer agreement.

CREDIT SALE: 21.24
SWIPED
MCCARTHY/RYAN
XXXXXXXXXXXX8599
VISA
AUTH CODE: 026038
SEQUENCE : <>186770408</> 012027418049

Signature

CUSTOMER COPY

21.24

AECOM Internet Expense Claim Audit Report

Employee Name:	McCarthy, Ryan S
Employee Number:	648137
Invoice Number:	EXP757701
Approved:	Yes
Apply Advances:	N
Invoice Description:	Expenses
Source:	WebExpense

GATHERUM

14,114.45

9

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 23-AUG-10
Invoice Number: 37043925

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731 **Project Name : 13046001 EXETER SEDIMENT INVESTIGATION**
Bill Through Date : 03-JUL-10 to 30-JUL-10

Task Number : 0100 **Task Name : SEDIMENT INVESTIGATI**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Cleary, Maryanne V	P13	23-JUL-10	1.00	105.00	105.00
Hartman, Kaitlin N	P11	09-JUL-10	1.00	92.50	92.50
Hartman, Kaitlin N	P11	16-JUL-10	6.00	92.50	555.00
Hartman, Kaitlin N	P11	23-JUL-10	-6.00	92.50	-555.00
McCabe, Mark M	P20	16-JUL-10	10.00	190.00	1,900.00
McCabe, Mark M	P20	23-JUL-10	5.00	190.00	950.00
McCarthy, Ryan S	P14	09-JUL-10	3.00	115.00	345.00
McCarthy, Ryan S	P14	16-JUL-10	7.50	115.00	862.50
Reed, Dodie	P13	16-JUL-10	0.50	105.00	52.50
Total Labor Bill Rate			**28.00**		**4,307.50**

Task Total : SEDIMENT INVESTIGATI **4,307.50**

Task Number : 0150 **Task Name : MAT PLACEMENT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Hartman, Kaitlin N	P11	23-JUL-10	12.00	92.50	1,110.00
Hartman, Kaitlin N	P11	30-JUL-10	4.00	92.50	370.00
McCabe, Mark M	P20	30-JUL-10	3.00	190.00	570.00
McCarthy, Ryan S	P14	23-JUL-10	5.00	115.00	575.00
McCarthy, Ryan S	P14	30-JUL-10	5.50	115.00	632.50
Total Labor Bill Rate			**29.50**		**3,257.50**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Lunch	McCarthy, Ryan S	30-JUN-10	EXP928078	24.94	1.0800	26.94
Miscellaneous - Allowable	Hartman, Kaitlin N	22-JUL-10	EXP933131	3.98	1.0800	4.30
Supplies	McCarthy, Ryan S	12-JUL-10	EXP928078	144.05	1.0800	155.57
Total Reimbursable				**172.97**		**186.81**

Task Total : MAT PLACEMENT **3,444.31**

Task Number : 0400 **Task Name : REPORTING**

4)

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	16-JUL-10	4.00	190.00	760.00
McCabe, Mark M	P20	23-JUL-10	6.00	190.00	1,140.00
McCabe, Mark M	P20	30-JUL-10	6.00	190.00	1,140.00
Warren, Laura A	P15	09-JUL-10	6.00	125.00	750.00
Warren, Laura A	P15	16-JUL-10	11.00	125.00	1,375.00
Total Labor Bill Rate			**33.00**		**5,165.00**
Task Total : REPORTING					**5,165.00**

Task Number : 0900 **Task Name : MEETINGS & PROJ.MGMT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Rodriguez, Deanna L	P12	16-JUL-10	0.25	97.50	24.38
Rodriguez, Deanna L	P12	23-JUL-10	0.75	97.50	73.13
Total Labor Bill Rate			**1.00**		**97.51**

SubConsultant

Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Subconsultant Fees	SPECTRUM ANALYTICAL INC	24-JUN-10	S1008440	306.00	1.0800	330.48
Total SubConsultant				**306.00**		**330.48**
Task Total : MEETINGS & PROJ.MGMT						**427.99**

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	769.65
Total Lump Sum	**769.65**
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION	**14,114.45**

Invoice Summaries

Total Current Amount :	14,114.45
Retention Amount :	0.00
Pre-Tax Amount :	14,114.45
Tax Amount :	0.00
Total Invoice Amount :	**14,114.45**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	14,114.45	141,360.21	155,474.66		
Billing Total :	14,114.45	141,360.21	155,474.66		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37043925	23-AUG-10	14,114.45
Outstanding Total :		14,114.45

OK 8/30/10

30-40-00-00 -182-29-00

Confirmation

Expense report number EXP933131 for 466.77 has been submitted to McCarthy, Ryan S for approval.

Expense Report EXP933131

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	**Hartman, Kaitlin N (652558)**	Report Submit Date	**26-JUL-2010**
Expense Dates	**23-JUN-2010 - 22-JUL-2010**	Attachments	View
Cost Center (DEPT)	**5827**	Report Total	**466.77 USD**
Detailed Business Purpose	**Project Purchase**	Reimbursement Amount	**466.77 USD**
Approver	**McCarthy, Ryan S**		
Receipts Status	**Required**		

ACM Signature _____

I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accord

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

Business Expenses

Cash Expenses

Receipt Expense	Merchant	Receipt	Receipt	Reimbursable Amount	Guest's	Guest's	Or

Date	Amount	Type	Justification	Name	Required	Missing Attachments	Details	(USD)	Country Name	Title	Na
23-Jun-2010	29.00 USD	TRA-Mileage	Project travel				[redacted]	29.00			
28-Jun-2010	55.95 USD	OFF-Supplies	Project Purchase		✔		[redacted]	55.95			
19-Jul-2010	153.70 USD	MISC-Miscellaneous	Project Purchase		✔		[redacted]	153.70			
22-Jul-2010	89.20 USD	MISC-Miscellaneous	Project Purchase		✔		[redacted]	89.20			
22-Jul-2010	134.94 USD	MISC-Miscellaneous	Project Purchase		✔		[redacted]	134.94			
22-Jul-2010	3.98 USD	MISC-Miscellaneous	Project Purchase				[redacted]	3.98			
							Total	466.77			

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

AECOM

EMPLOYEE EXPENSE REPORT

Employee No.	852558	Reimbursement Currency	USD-US Dollar
Employee Name	Kaitlin Hartman	Business Purpose	Project Purchase

Use these excel commands ONLY:
a. Ctrl + C - To copy the cell value
b. Ctrl + V - To paste the cell value
c. Ctrl + E - To prepare the spreadsheet for import
d. DO NOT USE ANY other excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shaded area - Protected or Selection
c. If the Area below reads ERROR please contact IT

Line No.	Descriptions							Daily Itinerary		Personal Auto			Transportation				Meals / Lodging				
	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to USD)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Resort, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	23-Jun-2010	60138702	200	Project travel	YES	USD	1.0000			56	0.500	28.00								
2	26-Jun-2010	60155786	320	Project Purchase	YES	USD	1.0000				0.500	0.00								
3	19-Jul-2010	60137137	15	Project Purchase	YES	USD	1.0000				0.500	0.00								
4	22-Jul-2010	60137137	15	Project Purchase	YES	USD	1.0000				0.500	0.00								
5	22-Jul-2010	60137137	15	Project Purchase	YES	USD	1.0000				0.500	0.00								
6	22-Jul-2010	60139731	0150	Project Purchase	YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										56		28.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

to AMIS Help Desk / (866) 333-AMIS

Employee No.	652558
Employee Name	Kaitlin Hannan

		Other								Business Meetings			
Line No.	Total Meals (Excluding Alcohol)	Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount	Total	Guests Name	Guests Title	Organization Name	Business Purpose
1	0.00						TKK-Travel All Other		28.00				
2	0.00						OFF-Supplies	55.95	55.95				
3	0.00						MISC-Miscellaneous	153.70	153.70				
4	0.00						MISC-Miscellaneous	89.20	89.20				
5	0.00						MISC-Miscellaneous	134.94	134.94				
6	0.00						MISC-Miscellaneous	3.98	3.98				
7	0.00						[redacted]		0.00				
8	0.00						[redacted]		0.00				
9	0.00						[redacted]		0.00				
10	0.00						[redacted]		0.00				
11	0.00						[redacted]		0.00				
12	0.00						[redacted]		0.00				
13	0.00						[redacted]		0.00				
14	0.00						[redacted]		0.00				
15	0.00						[redacted]		0.00				
16	0.00						[redacted]		0.00				
17	0.00						[redacted]		0.00				
18	0.00						[redacted]		0.00				
19	0.00						[redacted]		0.00				
20	0.00						[redacted]		0.00				
21	0.00						[redacted]		0.00				
22	0.00						[redacted]		0.00				
23	0.00						[redacted]		0.00				
24	0.00						[redacted]		0.00				
25	0.00						[redacted]		0.00				
Total	0.00	0.00	0.00	0.00	0.00	0.00		437.77	468.77				

1	0.00
2	0.00
3	0.00
4	0.00
5	0.00
Total	0.00

Verc Westford Gulf
179 Littleton rd
Westford, Ma 01886

Westford Gulf
179 LITTLETON ROAD
WESTFORD, MA 01886
Merchant#: 5M25677913001

07/22/10 07:58:30

5lb Ice Bg	2 @	1.99	3.98

Subtotal	3.98
Sales Tax	0.00
Total	$3.98
Debit Card(USD$)	$3.98
Change	$0.00

XXXXXXXXXXXX4754
DEB
Trans# 017461 Approval# 223631
Card Total: $3.98

*** PIN USED ***

Trans ID# 41388
e10a9113

Hood 1% Milk
Lowest Price
In the Area!!!

Confirmation

Expense report number EXP928078 for 240.73 has been submitted to Greenblatt, Marcia S for approval.

Expense Report EXP928078

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	McCarthy, Ryan S (648137)	Report Submit Date	21-JUL-2010
Expense Dates	30-JUN-2010 - 19-JUL-2010	Attachments	View
Cost Center (DEPT)	5827	Report Total	240.73 USD
Detailed Business Purpose	Project Expenses	Reimbursement Amount	240.73 USD
Approver	Greenblatt, Marcia S		
Receipts Status	Required		

ACM
Signature _____
I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
30-Jun-2010	24.94 USD	TRA-Lunch	project lunch						24.94					
07-Jul-2010	24.96 USD	TRA-Lunch	project lunch						24.96					
12-Jul-2010	144.05 USD	MISC-Miscellaneous	project supplies		✔				144.05					
01-Jul-2010	25.00 USD	TRA-Mileage	mileage						25.00					
19-Jul-2010	21.78 USD	TRA-Lunch	project lunch						21.78					
								Total	240.73					

AECOM

EMPLOYEE EXPENSE REPORT

Employee No. 648137
Employee Name Ryan McCarthy

Reimbursement Currency USD-US Dollar
Business Purpose Project Expenses

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact t

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	30-Jun-2010	60136731	0150	project lunch	YES	USD	1.0000				0.500	0.00							24.94	
2	7-Jul-2010	60145106	21	project lunch	YES	USD	1.0000				0.500	0.00							24.96	
3	12-Jul-2010	60136731	0150	project supplies	YES	USD	1.0000				0.500	0.00								
4	1-Jul-2010	60136811	1803	mileage	YES	USD	1.0000	westford	boston	50	0.500	25.00								
5	19-Jul-2010	60137747	0930	project lunch	YES	USD	1.0000				0.500	0.00							21.78	
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										50		25.00	0.00	0.00	0.00	0.00	0.00	0.00	71.68	0.00

COMPANY PAID EXPENSES

1						USD												
2						USD												
3						USD												
4						USD												
5						USD												
Total													0.00	0.00	0.00	0.00	0.00	

Employee Signature

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

he AIMS Help Desk / (866) 823-AIMS

Employee No. 848137

Employee Name Ryan McCarthy

Line No.	Total Meals (Excluding Alcohol)	Other							Total	Business Meetings			
		Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount		Guests Name	Guests Title	Organizations Name	Business Purpose
1	24.94						Select Expenditure Type		24.94				
2	24.98						Select Expenditure Type		24.98				
3	0.00						MISC-Miscellaneous	144.05	144.05				
4	0.00						Select Expenditure Type		25.00				
5	21.76						Select Expenditure Type		21.76				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	71.68	0.00	0.00	0.00	0.00	0.00		144.05	240.73				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

Las Olas Taqueria

DATE: 06/30/2010 TIME: 1:00:46 PM
CASHIER ID: 10

I agree to pay the above total amount according to the card issuer agreement.

CREDIT SALE: 24.94
[illegible]IPED
[illegible]CCARTHY/RYAN
XXXXXXXXXXXX8599
VISA
AUTH CODE: 009308
SEQUENCE : <>2158000372</> 018146595732

signature

CUSTOMER COPY

OLIVA'S MARKET
83-85 EAST MAIN STREET
MILFORD MA 01757
508-473-7928

Merchant ID: 518564980184788
Term ID: 4786

Sale

VISA
XXXXXXXXXXXX8599
Entry Method: Swiped
Aprvd: Online Batch#: 000002
07/07/10 11:26:57
Invk: 00000021 Appr Code: 051298

Total: $ 11.01

Customer Copy

THANK YOU
FOR VISITING

Welcome to Dunkin' Donuts
Store #343217
146 South Main Street, Milford
7/7/2010 7:52:16 AM
Eat In

Order Number: 738

Register:1 Tran Seq No: 1471:38
Cashier:Taker O.
2 D-Btl Water MD 3.78
1 9pc Hash Browns 1.29

Sub. Total: $5.07
Tax: $0.32
Total: $5.39
Discount Total: $0.00

Change $0.00
American Express: $5.39

****

HEY AMERICA!
WANT A FREE DONUT WHEN YOU PURCHASE A MEDIUM OR LARGER BEVERAGE?
Go to TELLDUNKIN.COM within
a few [illegible] about your visit.

Welcome to Dunkin' Donuts
Store #331845
31 Main St, Milford
7/7/2010 5:43:52 AM
Eat In

Order Number: 176

Register:2 Tran Seq No: 154217G
Cashier:Danielle G.
1 Ht Cof MD Orlgblnd 1.79
1 Reg -Crm&Sug
1 Bagel w/Spread 2.09
1 Everything Bagel
1 Toasted
1 1.75oz RF Plain CC
1 Bagel&Hot Coffee (MD) (0.19)
1 Rfl 14oz HtCofDrgnl 1.54

Sub. Total: $5.23
Tax: $0.33
Total: $5.56
Discount Total: ($0.19)

Change $0.00
American Express: $5.56

****

HEY AMERICA!
WANT A FREE DONUT WHEN YOU PURCHASE A MEDIUM OR LARGER BEVERAGE?
Go to TELLDUNKIN.COM within
3 days; tell us about your visit.
Enter Validation Code: _____
Visit DunkinDonuts.com for coupon restrictions.
Franchisee: Please use PLU #201

Thank You Come Back Again

#201

GEMPLER'S®

PO Box 44993
Madison, WI USA 53744-4993

Order By Phone: 1-800-382-8473
Order Online: www.Gemplers.com
Order By Fax: 1-800-551-1128

Gempler's
FEI # 39-1726218
1125 Deming Way
Madison, WI U.S.A. 53717

000077

BILL TO
MCCARTHY,RYAN
ATTN: RYAN MCCARTHY
15 WESTSIDE DR
EXETER NH 03833-4215

SHIP TO
MCCARTHY,RYAN
15 WESTSIDE DR
EXETER NH 03833-4215

Order No.	P.O. No.	Sold To No.	Invoice No.	Invoice Date	Due Date
SC06949091	MCCARTHY07082010	6202826 - 1	1015769805	07/12/2010	07/12/2010

Buyer	Carrier	Freight Terms	Ship Date	Payment Terms
	FDXGND	LOCKED	07/09/2010	PDBYCC

LINE	PRODUCT NO.	DESCRIPTION	QTY. B.O.	QTY. SHIP	U.O.M.	UNIT AMOUNT	AMOUNT
1	113145	TREE ANCHOR 15 IN CSTL	0	2	PK	64.10	128.20
2	2706PROSP	GEMPLER'S MASTER MAR 2010	0	1	EA	0.00	0.00

Thank you for your order.

	SUBTOTAL:	128.20
	FREIGHT:	15.85
	TAXES:	0.00
PN9295250519 ML	CHARGED TO **********1002	144.05
PAYMENT TERMS: PDBYCC	PAID WITH CREDIT CARD - BALANCE DUE	0.00 USD

These items are sold for domestic consumption in the United States. If exported, purchaser assumes full responsibility for compliance with US export controls.

ORIGINAL

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT (DO NOT STAPLE)

☐ FOR COMMENTS OR CHANGE OF ADDRESS, CHECK BOX AND ENTER INFORMATION ON REVERSE SIDE

BILL TO
MCCARTHY,RYAN
ATTN: RYAN MCCARTHY
15 WESTSIDE DR
EXETER NH 03833-4215

REMIT TO:
GEMPLER'S
Account #: 6202826
PO BOX 5176
JANESVILLE WI 53547-5176

Order No.	Invoice No.	Bill To No.	Amount Due
SC06949091	1015769805	6202826 - 1	0.00 USD

SPECTRUM ANALYTICAL, INC.
Featuring
HANIBAL TECHNOLOGY

INVOICE

To: AECOM Environment
2 Technology Park Drive
Westford, MA 01886-3140
Attn: Accounts Payable

Date: June 24, 2010
Invoice Number: S1008440
Work Order No.: SB13635
RQN #: NA

Purchase Order No.:
Client Project No.: 60139731.0900
Project Manager: Ryan McCarthy
Site Location: Exeter, NH

The following charges are due for the above indicated samples submitted on 10-Jun-10.

Matrix	Analysis	Quantity	Unit Price	Total Price
Soil/Sediment	PAHs by SW846 8270C	3	$65.00	$195.00
Soil/Sediment	Volatile Organic Aromatics by SW846 8260B	3	$37.00	$111.00
Soil/Sediment	Solids, Percent	3	$0.00	$0.00
Subtotal				**$306.00**
TOTAL AMOUNT DUE FOR SERVICES:				**$306.00**

Please remit payment to: Spectrum Analytical, Inc.
830 Silver Street
Agawam, MA 01001

Your prompt payment is greatly appreciated. Thank you for your business!

Payment Terms: Net 30 Days

AECOM #: 41001
Project #: 60139731.
Task #: 0900
Expenditure Type: SUBC - SUBCONSULTANT FEES
PO # (if applicable): 7255 ACM
PO Line # (if applicable):
Amount: $306 00
Date Approved: 7/7/10
Approval Signature:
Approver's Employee #: 648137
Approver's Phone #: 978 589 3236
Pay When Paid: Yes ___ No X

M09130

11 Almgren Drive • Agawam, MA 01001 • Operational Building & Sample Receiving
830 Silver Street • Agawam, MA 01001 • Administrative Offices, Volatile & Air Departments
1-800-789-9115 • 413-789-9018 • FAX 413-789-4076 • www.spectrum-analytical.com

GATHERUM

27,923.23

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 03-SEP-10
Invoice Number: 37045931

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731 **Project Name : 13046001 EXETER SEDIMENT INVESTIGATION**
Bill Through Date : 31-JUL-10 to 27-AUG-10

Task Number : 0100 **Task Name : SEDIMENT INVESTIGATI**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	06-AUG-10	4.00	190.00	760.00
Total Labor Bill Rate			**4.00**		**760.00**

SubConsultant

Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Outside Services - Allow	CETCO	12-JUL-10	263801	378.86	1.0800	409.17
Total SubConsultant				**378.86**		**409.17**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Outside Contractors Fees	CETCO	12-JUL-10	263801	1,110.00	1.0000	1,110.00
Total Reimbursable				**1,110.00**		**1,110.00**

Task Total : SEDIMENT INVESTIGATI **2,279.17**

Task Number : 0150 **Task Name : MAT PLACEMENT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCarthy, Ryan S	P14	06-AUG-10	2.50	115.00	287.50
McCarthy, Ryan S	P14	13-AUG-10	2.00	115.00	230.00
McCarthy, Ryan S	P14	20-AUG-10	1.00	115.00	115.00
Total Labor Bill Rate			**5.50**		**632.50**

SubConsultant

Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Professional Services	ENERGY & ENVIRONMENTAL	30-JUL-10	RCL851647559	19,000.00	1.0800	20,520.00
Total SubConsultant				**19,000.00**		**20,520.00**

GATHERUM

27,923.23

Unitil

Requisition ID: 68776
CHK

Ship To:
Northern Utilities NH
325 West Road
Portsmouth, NH 03801
Attn: Steven Hamblen
Phone: (603) 294-5154 Fax: (603) 431-6476

Bill To:
Northern Utilities NH/ME
6 Liberty Lane West
Hampton, NH 03842-1720
Unitil Service Corp.
Attn: Accounts Payable
Phone: (603) 772-0775 Fax: (603) 773-6605

Ordered From:
AECOM
1176 PAYSPHERE CIR
CHICAGO, IL 60674
Phone: **Fax:**

Order Date:	Requisitioner:	FOB & Freight Terms
9/30/2010	April Burnham	

Due Date: 10/8/2010

Line	Qty	Description	Tax	Allocation Acct Num	Allocation Auth-CWO	Unit Price	Unit	Sub
1	1	Professional Services	N	304000001822900	$27,923.23	$27,923.23	EA	$27,923.23

Order Total: $27,923.23

Invoice Number: 37045931 **Admin:** Grace Hollhan
Releasing Group: N/A **Receiving Group:** N/A
Approvals:
1 - Thomas Gatherum Waiting...
2 - David Chong Waiting...

Date Printed: 9/30/2010
Printed By: April Burnham

RECEIVED
SEP 29 2010
ACCOUNTS PAYABLE

10/8

Unitil

Batch: 302804858UPS
Requisition: 68776
Invoice: 37045931
CHK

Ship To:
Northern Utilities NH
325 West Road
Portsmouth, NH 03801
Attn: Steven Hamblen
Phone: (603) 294-5154 Fax: (603) 431-6476

Bill To:
Northern Utilities NH/ME
6 Liberty Lane West
Hampton, NH 03842-1720
Unitil Service Corp.
Attn: Accounts Payable
Phone: (603) 772-0775 Fax: (603) 773-6605

Ordered From:
AECOM
1178 PAYSPHERE CIR
CHICAGO, IL 60674

Order Date:	Requisitioner:
9/30/2010	April Burnham

Line	Qty	Description	Tax	Allocation Acct Num	A-W-C	Dist. Amount	Unit	Sub
1	1	Professional Services	N	304000001822900		$27,923.23	EA	$27,923.23

Invoice Total: $27,923.23

Invoice Number: 37045931 **Invoice Amount:** $27,923.23
Releasing Group: N/A **Receiving Group:** N/A
Approvals:
1 - Thomas Gatherum 10/1/2010
2 - David Chong 10/1/2010

AP Notes:	
Vouchered by:	MJB
Return Check to:	Payee
Voucher Month:	Oct

CETCO

Phone 847.851.1800 Fax 847.851.1899

* INVOICE *

REMIT TO: CETCO
NW 5022
P.O. BOX 1450
MINNEAPOLIS, MN 55485 5022

INVOICE NO: 263801
INVOICE DATE: 7/12/10
SHIP DATE: 7/08/10
ORDER DATE: 7/07/10
PYMT TERMS: NET 30 DAYS
FRT TERMS: PREPAID & ADD
SALESPERSON: / MKT:RP

S/T: 6220 B/T: 6220

SOLDTO:AECOM, INC.
DBA AECOM ENVIRONMENT
2 TECHNOLOGY PARK DRIVE

WESTFORD MA 01886

02 SHIPTO
AECOM - ATTN: RYAN MCCARTHY
277 WATER STREET

EXETER NH 03833

P.O.#:8563ACM VIA: PRO #981863422

SHIP FROM
CETCO LOVELL PLANT
FOB ORIGIN

COMMENTS:NAPL COAL TAR SEEP

SHIPPED QTY	U/M	PRICING QTY	U/M	UNIT PRICE	EXT. AMOUNT
DESCRIPTION					
600.00	EACH	600.00	SF	1.85	1110.00
REACTIVE CORE MAT ORGANO CLAY					
RCM w/ BLK N/W & Woven					
CAR/VEHICLE #: PRO #981863422					
COMMENTS:THIS IS FOR 8 ROLLS OF RCM - EACH ROLL 15' X 5'					

MISC: QTY	DESCRIPTION	UNIT PRICE	EXT. AMOUNT
1.0000	CETCO-PPD&ADD FREIGHT	378.86	378.86

TOTAL UNITS 600.0000 SALES TAX
TOTAL POUNDS 769.8000

REMIT $ 1,488.86
PURCHASER MAY BE LIABLE FOR USE TAX PAGE 1 TOTAL INVOICE 1,488.86

AECOM #: 41891
Project #: 60139731
Task #: 0100
Expenditure Type: SUBC-OUTSIDE SERVICES-ALLOW
CON-Subcontractors Fees
PO # (if applicable): 8563ACM
PO Line # (if applicable):
Amount: $ 1488.86
Date Approved: 7/28/10
Approval Signature:
Approver's Employee #: 648137
Approver's Phone #: 978-589-3236
Pay When Paid: Yes ___ No X

MDs*30

UND University of North Dakota

GRANTS & CONTRACTS ADMINISTRATION
P.O. BOX 7306
GRAND FORKS, NORTH DAKOTA 58202-7306

INVOICE #01

CUSTOMER NAME AND ADDRESS:

Accounts Payable
AECOM, Inc. dba AECOM Environment
2 Technology Park Drive
Westford, MA 01886

CHARGE DATE: 07/30/10
DUE DATE: On Receipt

PROJECT	FUND	DEPT	AMOUNT
UNO09183-7	41000	1120	USD 19,000.00
TOTAL			USD 19,000.00

EXPLANATION OF CHARGES:

AECOM PO Nbr 8883ACM, Line Nbr 1 for project between UND EERC and AECOM entitled "Exeter Site" (Proposal Number 2010-0008)

Total amount of PO due USD 19,000.00

REMIT TO: University of North Dakota
Attn: Wayde Anderson
Grants & Contracts Administration
Box 7306
Grand Forks, ND 58202

DIRECT QUESTIONS ON THIS CHARGE TO:

Wayde Anderson
Grants & Contracts Administration
Phone: (701) 777-6739

cc: EERC Accounting
Paul Aronson, EERC

AECOM #: 41001
Project #: 60139731
Task #: 150
Expenditure Type: Analysis
PO # (if applicable): 8883ACM
PO Line #(if applicable):
Amount: $19,000
Date Approved: 8/16/10
Approval Signature:
Approver's Employee #: 648678
Approver's Phone #: 978.689.3262
Pay When Paid: Yes ___ No ✓

MCB120

Confirmation

Expense report number EXP934970 for 243.79 has been submitted to McCarthy, Ryan S for approval.

Expense Report EXP934970

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	Hartman, Kaitlin N (652568)	Report Submit Date	28-JUL-2010
Expense Dates	20-JUL-2010 - 20-JUL-2010	Attachments	View
Cost Center (DEPT)	5827	Report Total	243.79 USD
Detailed Business Purpose	Project travel/Purchase	Reimbursement Amount	243.79 USD
Approver	McCarthy, Ryan S		
Receipts Status	Required		

ACM Signature _____

I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordi

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Receipt Expense	Merchant Receipt	Receipt	Reimbursable Amount	Guest's	Guest's Orç

Date	Amount	Type	Justification Name	Required	Missing Attachments	Details	(USD)	Country Name	Title	Nai
20-Jul-2010	85.61 USD	MISC-Miscellaneous	Project Purchase	✔	✚	[redacted]	85.61			
20-Jul-2010	149.97 USD	MISC-Miscellaneous	Project Purchase	✔	✚	[redacted]	149.97			
20-Jul-2010	8.21 USD	TRA-Lunch	Project Purchase		✚	[redacted]	8.21			
						Total	243.79			

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

AECOM

EMPLOYEE EXPENSE REPORT

Employee No. 662556
Employee Name Kaitlin Hartman

Reimbursement Currency USD-US Dollar
Business Purpose Project travel/Purchase

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact S

	Descriptions							Daily Itinerary		Personal Auto			Transportation				Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to USD)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Sls.)	Lodging	Breakfast	Lunch	Dinner
1	20-Jul-2010	60137197	15	Project Purchase	YES	USD	1.0000				0.500	0.00								
2	20-Jul-2010	60137197	15	Project Purchase	YES	USD	1.0000				0.500	0.00								
3	20-Jul-2010	60139731	0150	Project Purchase	YES	USD	1.0000				0.500	0.00							8.21	
4					YES	USD	1.0000				0.500	0.00								
5					YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										0		0.00	0.00	0.00	0.00	0.00	0.00	0.00	8.21	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

the AIMS Help Desk / (888) 833-AIMS

Employee No. 852558

Employee Name Kaitlin Hartman

Line No.	Total Meals (Excluding Alcohol)	Other							Total	Business Meetings			
		Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount		Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						MISC-Miscellaneous	85.61	85.61				
2	0.00						MISC-Miscellaneous	149.97	149.97				
3	8.21						TRA-Meals		8.21				
4	0.00						Select Expenditure Type		0.00				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	8.21	0.00	0.00	0.00	0.00	0.00		235.58	243.79				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

TARGET

GREENLAND - 603-501-1470
07/27/2010 07:14 PM EXPIRES 10/25/10

[redacted]

LUGGAGE			
069100021	BACKPACK	N	$49.99
069100068	BKPK SWISS	N	$49.99
069100118	BKPK SWISS	N	$49.99

SUBTOTAL $149.97 → $149.97
NO TAX $0.00
TOTAL $149.97

*1003 AMEX CHARGE $149.97

REG#2-0208-2630-0075-8208-6 VCD#752-256-534

Get 5 cents off every time you use a reusable bag!

[redacted]

TERMINAL I.D.: [redacted]

MERCHANT #: [redacted]

AMEX
SALE
[redacted]

TOTAL $85.61 → $85.61

CUSTOMER COPY

Paul's Diner
Six Carlisle Place
Westford, MA 01886
(978) 692-9269
www.paulsdiner.com

Date: 07/27/2010 11:53AM
Card Type: VISA
Acct Num: **********4754
Exp Date: **/**
Customer: HARTMAN/KAITLIN N
Auth Code: 105861
Server: 59
Table #: 108 ORDER TAKER

Amount: $7.21

1.00

8.21

Signature _____

Total $ _____

Please sign and total 1 copy and leave with server**

Please visit us again soon

ORACLE Expense Reports [redacted]

Confirmation

Expense report number EXP935815 for 288.39 has been submitted to Kennedy, Matthew J for approval.

Expense Report EXP935815

(Return) (Create New Expense Report) (Printable Page)

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	McCarthy, Ryan S (848137)	Report Submit Date	29-JUL-2010
Expense Dates	21-JUL-2010 - 27-JUL-2010	Attachments	View (Add)
Cost Center (DEPT)	8827	Report Total	288.39 USD
Detailed Business Purpose	Project Expenses	Reimbursement Amount	288.39 USD
Approver	Kennedy, Matthew J		
Receipts Status	Required		

ACM Signature _____

I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
21-Jul-2010	11.93 USD	MISC-Miscellaneous	Project expenses						11.93					
27-Jul-2010	11.40 USD	TRA-Lunch	Project expenses						11.40					
27-Jul-2010	265.06 USD	MISC-Miscellaneous	Project expenses						265.06					
								Total	288.39					

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Return | Create New Expense Report | Printable Page

AECOM

EMPLOYEE EXPENSE REPORT

Employee No.	646137
Employee Name	Ryan McCarthy
Reimbursement Currency	USD-US Dollar
Business Purpose	Project Expenses

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

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b. Shared area - Protected or Selection
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	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	21-Jul-2010	60139731	0150	Project expenses	YES	USD	1.0000				0.500	0.00								
2	27-Jul-2010	60139731	0150	Project expenses	YES	USD	1.0000				0.500	0.00							11.40	
3					YES	USD	1.0000				0.500	0.00								
4					YES	USD	1.0000				0.500	0.00								
5					YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										0		0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.40	0.00

COMPANY PAID EXPENSES

1						USD													
2						USD													
3						USD													
4						USD													
5						USD													
Total													0.00	0.00	0.00	0.00	0.00		

Employee Signature

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

hs AIMS Help Desk / (866) 633-AIMS

Employee No.	546137
Employee Name	Ryan McCarthy

		Other								Business Meetings			
Line No.	Total Meals (Excluding Alcohol)	Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount	Total	Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						MISC-Miscellaneous	11.93	11.93				
2	11.40						MISC-Miscellaneous	265.06	276.46				
3	0.00						Select Expenditure Type		0.00				
4	0.00						Select Expenditure Type		0.00				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	11.40	0.00	0.00	0.00	0.00	0.00		276.99	288.39				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

Las Dias Taqueria

DATE: 07/27/2010 TIME: 11:34:26 AM
CASHIER ID: 89

I agree to pay the above total amount
according to the card issuer agreement.

CREDIT SALE: 11.40
SWIPED
MCCARTHY/RYAN
XXXXXXXXXXXX8589
VISA
AUTH CODE: 030998
SEQUENCE : <>224823546</> 020867416268

signature

CUSTOMER COPY

Convenient Grocer
201 Front Street
Exeter, NH 03833
0966099001
(603)772-5737

C O P Y

07/21/2010 18:08

Sale:

Transaction # 21
Card Type: VISA
Acc: **********8539
Entry: Swiped
Sale: 11.93
Auth Code: 063128
Respon. APPROVD # 063128

ACE

THANK YOU FOR SHOPPING AT
ARJAY ACE HARDWARE
55 LINCOLN STREET
EXETER, N.H. 03833-3213
(603) 772-6054

FOR YOUR CONVENIENCE WE OFFER DUMPSTER
SERVICE & FREE POOL WATER TESTING....
7/27/10 8:47AM HT 557 SALE

82556	1 EA	7.99 EA	N
GLOVES BLUETTE KNIT LG			7.99
[illegible]125	52 EA	4.79 EA	N
CHAIN PROOF 5/16" G3075'			249.08
82556	1 EA	7.99 EA	N
GLOVES BLUETTE KNIT LG			7.99

SUB-TOTAL: 265.06 TAX:
TOTAL: 265.06
BC AMT: $265.06

BK CARD#: XXXXXXXXXX1002
ID: 376210174995890982
AUTH: 566042 AMT: 265.06
[illegible] reference #:552100 Bat#000001
[illegible]PED
CARD TYPE:AM EXPRESS EXPR: XXXX

==>> JRNL#F52100 <<==
CUST # *5
ACE REWARDS ID # 19773890129

THANK YOU RYAN S MCCARTHY
FOR YOUR PATRONAGE

ACE

Name: X_____

I agree to pay above total amount
according to card issuer agreement
(merchant agreement if credit voucher)
Customer Copy

FedEx.

Invoice Number	Invoice Date	Account Number	Page
7-171-35759	Jul 28, 2010	0021-0304-4	1 of 33

FedEx Tax ID: 71-0427007

Billing Address:
AECOM ENVIRONMENT
2 TECHNOLOGY PARK DR STE 1
WESTFORD MA 01886-3140

Shipping Address:
AECOM ENVIRONMENT
2 TECHNOLOGY PARK DR STE 1
WESTFORD MA 01886-3140

Invoice Questions?
Contact FedEx Revenue Services
Phone: (800) 622-1147 M-Sa 7-8 (CST)
Fax: (800) 548-3020
Internet: www.fedex.com

Invoice Summary Jul 28, 2010

FedEx Express Services		
Transportation Charges		2,624.15
Base Discount		-1,275.44
Earned/Grace Discount		-288.71
Special Handling Charges		215.47
Total Charges	USD	$1,275.47
FedEx Ground Services		
Transportation Charges		24.20
Other Handling Charges		16.11
Total Charges	USD	$40.31
TOTAL THIS INVOICE	**USD**	**$1,315.78**

You saved $1,564.15 in discounts this period!

Shipments included in this invoice received an earned discount. If you would like to know how it was calculated, please go to the following URL: https://www.fedex.com/EarnedDiscounts/.
Other discounts may apply.

FedEx News!
Better for you. Better for the environment. Choose FedEx Billing Online Plus to receive and pay your invoices. Sign up by July 31, 2010, and you will be entered for a chance to win. One winner will choose between a trip to Yosemite and the California coast or the canyons of Arizona and Utah. Other prizes include Apple iPads and the chance for FedEx to adopt an acre of land in need of protection in your name. You will also earn another chance to win for every eligible shipment you complete before July 31, 2010. Streamline your billing and take advantage of reporting features.

AECOM #: 41001
Project #: 04115806
Task #: 1
Expenditure Type: off-Post-shipping
PO # (if applicable):
PO Line # (if applicable):
Amount: 1315.78
Date Approved: 8/3/10
Approval Signature:
Approver's Employee #: 6466986
Approver's Phone #: 9785893604
Pay When Paid: Yes ___ No ✓

To ensure proper credit, please return this portion with your payment to FedEx. Please do not staple or fold. Please make check payable to FedEx.
☐ For change of address, check here and complete form on reverse side.

Invoice Number	Account Number	Amount Due
7-171-35759	0021-0304-4	USD $1,315.78

Remittance Advice
Your payment is due by Aug 12, 2010

0021030471713575969000131576 77

0000392 04 MB 1.232 **AUTO 8 0 1208-01886-314002 -C09-P0039241

AECOM ENVIRONMENT
2 TECHNOLOGY PARK DR STE 1
WESTFORD MA 01886-3140

FedEx
P.O. Box 371461
Pittsburgh PA 15250-7461

608190880173 35

1208-03-00-0000392-0017-00481

FedEx.

Invoice Number	Invoice Date	Account Number	Page
7-171-35759	Jul 28, 2010	0021-0304-4	4 of 33

FedEx Express Shipment Detail By Reference (Original)

[redacted]

- Fuel Surcharge - FedEx has applied a fuel surcharge of 6.00% to this shipment.
- The Earned Discount for this ship date has been calculated based on a revenue threshold of $ 46363.92
- The required information to bill you for this shipment was not received electronically by FedEx. Please be sure you know and always follow the correct shipping procedures as outlined in the FedEx Service Guide or online at fedex.com/service information.
- Distance Based Pricing, Zone 8
- FedEx has audited this shipment for correct packages, weight, and service. Any changes made are reflected in the invoice amount.
- We calculated your charges based on a dimensional weight of 4.0lbs, 15"x 10"x 5", divided by 194.

		Sender	Recipient		
Automation	CAFE	AECOM ENVIRONMENT	JOHNSON		
Tracking ID	950863936367	2 TECHNOLOGY PARK DR STE 1	2161 WEBSTER STREET1908		
Service Type	FedEx Express Saver	WESTFORD MA 01886-3140 US	OAKLAND CA 94612 US		
Package Type	Customer Packaging				
Zone	08				
Packages	1				
Rated Weight	4.0 lbs, 1.8 kgs	Transportation Charge			20.50
Delivered	Jul 16, 2010 10:58	Fuel Surcharge			0.99
Svc Area	A1	Earned Discount			-2.28
Signed by	JOHNSON	Discount			-7.16
FedEx Use	000000080/0007179/_	Total Charge		USD	$11.94 ✓

[redacted]

- The Earned Discount for this ship date has been calculated based on a revenue threshold of $ 46184.93
- Fuel Surcharge - FedEx has applied a fuel surcharge of 6.00% to this shipment.
- Distance Based Pricing, Zone 3
- FedEx has audited this shipment for correct packages, weight, and service. Any changes made are reflected in the invoice account.
- The package weight exceeds the maximum for the packaging type, therefore, FedEx Pak was rated as Customer Packaging.

		Sender	Recipient		
Automation	CAFE	Aecom	Annemarie Panzer		
Tracking ID	950863936398	2 Technology Park Drive	Aecom		
Service Type	FedEx Express Saver	WESTFORD MA 01886 US	30 knightsbridge Road		
Package Type	Customer Packaging		PISCATAWAY NJ 08854 US		
Zone	03				
Packages	1				
Rated Weight	5.0 lbs, 2.3 kgs	Transportation Charge			10.50
Delivered	Jul 23, 2010 10:19	Earned Discount			-1.16
Svc Area	A1	Fuel Surcharge			0.45
Signed by	T.HARRISON	Discount			-3.68
FedEx Use	000000080/0007189/_	Total Charge		USD	$6.11 ✓

[redacted]

- The Earned Discount for this ship date has been calculated based on a revenue threshold of $ 46184.93
- Fuel Surcharge - FedEx has applied a fuel surcharge of 6.00% to this shipment.
- Distance Based Pricing, Zone 8

		Sender	Recipient		
Automation	USAB	ENSR	CAROL GRABOWSKI		
Tracking ID	857701990390	AECOM ENVIRONMENT	ENERGY & ENVIRONMENTAL RESEARC		
Service Type	FedEx Priority Overnight	2 TECHNOLOGY PARK DR STE 1	15 NORTH 23RD ST		
Package Type	Customer Packaging	WESTFORD MA 01886-3140 US	UNIVERSITY OF NORT ND 58202 US		
Zone	05				
Packages	1				
Rated Weight	45.0 lbs, 20.4 kgs	Transportation Charge			199.80
Delivered	Jul 23, 2010 09:12	Earned Discount			-21.98
Svc Area	A1	Discount			-99.90
Signed by	B.LABONTE	Fuel Surcharge			8.23
FedEx Use	020364536/0001574/_	Total Charge		USD	$86.15 ✓

1208-03-00-0000392-0016-0008154

[redacted]

- The Earned Discount for this ship date has been calculated based on a revenue threshold of $ 49184.93
- Fuel Surcharge - FedEx has applied a fuel surcharge of 8.00% to this shipment.
- Distance Based Pricing, Zone 4
- FedEx has audited this shipment for correct packages, weight, and service. Any changes made are reflected in the invoice amount.
- We calculated your charges based on a dimensional weight of 11.0lbs, 24" x 12" x 7", divided by 194.
- Package Delivered to Recipient Address - Release Authorized

		Sender	Recipient		
Automation	CAFE				
Tracking ID	452681107644	TERRY GOODE	DAVE BORHAM		
Service Type	FedEx Standard Overnight	AECOM ENVIRONMENT	724 LONG LANE		
Package Type	Customer Packaging	2 TECHNOLOGY PARK DRIVE	GETTYSBURG PA 17325 US		
Zone	04	WESTFORD MA 01886 US			
Packages	1				
Actual Weight	1.0 lbs, 0.5 kgs	Transportation Charge			84.15
Rated Weight	11.0 lbs, 5.0 kgs	Earned Discount			-7.08
Delivered	Jul 28, 2010 11:41	Residential Delivery			2.50
Svc Area	AA	Discount			-32.08
Signed by	see above	Fuel Surcharge			2.20
FedEx Use	000000000/0001327/02	Total Charge		USD	$59.71 ✓

60137363.420 Reference Subtotal **USD** **$91.20**

[redacted]

- Fuel Surcharge - FedEx has applied a fuel surcharge of 8.00% to this shipment.
- The Earned Discount for this ship date has been calculated based on a revenue threshold of $ 49184.93
- Distance Based Pricing, Zone 2

		Sender	Recipient		
Automation	USAB				
Tracking ID	857704880389	ENSR	PULCE LITCHFIELD		
Service Type	FedEx Priority Overnight	AECOM ENVIRONMENT	SPECTRUM ANALYTICAL		
Package Type	Customer Packaging	2 TECHNOLOGY PARK DR STE 1	11 ALMGREN DR		
Zone	02	WESTFORD MA 01886-3140 US	AGAWAM MA 01001 US		
Packages	1				
Rated Weight	15.0 lbs, 6.8 kgs	Transportation Charge			37.35
Delivered	Jul 23, 2010 10:07	Fuel Surcharge			1.18
Svc Area	A2	Earned Discount			-4.11
Signed by	D.WALSH	Discount			-18.68
FedEx Use	020304538/0001486/_	Total Charge		USD	$15.72 ✓

60139731.0150 Reference Subtotal **USD** **$15.72**

[redacted]

- Fuel Surcharge - FedEx has applied a fuel surcharge of 8.00% to this shipment.
- The Earned Discount for this ship date has been calculated based on a revenue threshold of $ 49184.93
- Distance Based Pricing, Zone 2

		Sender	Recipient		
Automation	CAFE				
Tracking ID	452681107427	TERRY GOODE	MICHAELA BROCKMANN		
Service Type	FedEx Priority Overnight	AECOM ENVIRONMENT	R.I.DEPT.OF ENV.MANG.		
Package Type	FedEx Box	2 TECHNOLOGY PARK DRIVE	235 PROMENADE ST		
Zone	02	WESTFORD MA 01886 US	PROVIDENCE RI 02908 US		
Packages	1				
Rated Weight	9.0 lbs, 4.1 kgs	Transportation Charge			30.95
Delivered	Jul 23, 2010 10:29	Discount			-15.19
Svc Area	A1	Fuel Surcharge			0.95
Signed by	C.THIBEAULT	Earned Discount			-3.34
FedEx Use	000000000/0001486/_	Total Charge		USD	$12.78 ✓

60146121.28451 Reference Subtotal **USD** **$12.78**

1208-03-00-0000392-0011-0008149

Gatherum, Tom

From: McCabe, Mark [Mark.McCabe@aecom.com]
Sent: Thursday, September 23, 2010 2:05 PM
To: Gatherum, Tom
Cc: Rodriguez, Deanna
Subject: Invoice Review

Tom,
I looked at the backup for the invoice and believe that the charges to the project are correct. The problem is that the documentation of the Fed Ex charges and materials from Kaitlin's expense report included charges for other projects as well.

The Fed Ex charges for the Exeter Project were limited to $84.15 and $15.72 for sample shipment and Kaitlin's charges were limited to $8.21 for lunch.

In the future I'll try to make sure that your invoice back up is better segregated.

Regards,
Mark

Mark McCabe
Environment
D: 978.589.3262 C:508.423.9018
mark.mccabe@aecom.com

AECOM
2 Technology Park Drive
Westford, MA 01886-3140
Phone: 978.589.3000
Fax: 978.589.3100
www.aecom.com

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

req. 68839
O. OL
10-01-10

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

DUE 10/07/10

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

Invoice Date: 07-SEP-10
Invoice Number: 37046167 Line memo
Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734 **Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM**
Bill Through Date : 03-AUG-10 to 27-AUG-10

Task Number : 0100 **Task Name : INSTALLATION ACTIVIT**

RECEIVED
SEP 30 2010
By

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	06-AUG-10	9.00	97.50	877.50
Callahan, Colin P	P12	06-AUG-10	4.00	97.50	390.00
Mosquera, Justin L	P16	06-AUG-10	0.25	135.00	33.75
Mosquera, Justin L	P16	27-AUG-10	0.50	135.00	67.50
Total Labor Bill Rate			**13.75**		**1,368.75**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Lunch	Callahan, Colin P	21-JUL-10	EXP965082	16.07	1.0800	17.36
Lunch	Callahan, Colin P	04-AUG-10	EXP965082	14.43	1.0800	15.58
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	20-JUL-10	RN16442	297.50	1.0800	321.30
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	23-JUL-10	RN16699	31.88	1.0800	34.43
Rent - Equipment	ENTERPRISE RENT A CAR	26-JUL-10	D231210	62.61	1.0800	67.62
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	05-AUG-10	RN17296	42.50	1.0800	45.90
Rent - Equipment	ENTERPRISE RENT A CAR	11-AUG-10	D231356	86.61	1.0800	93.54
Rent - Vehicles	Callahan, Colin P	20-JUL-10	EXP965082	60.12	1.0800	64.93
Rent - Vehicles	Callahan, Colin P	04-AUG-10	EXP965082	81.61	1.0800	88.14
Travel All Other	Callahan, Colin P	21-JUL-10	EXP965082	7.00	1.0800	7.56
Travel All Other	Callahan, Colin P	04-AUG-10	EXP965082	7.00	1.0800	7.56
Total Reimbursable				**707.33**		**763.92**

Task Total : INSTALLATION ACTIVIT **2,132.67**

Task Number : 0200 **Task Name : EVALUATION ACTIVITIE**

RECEIVED
OCT 4 2010
ACCOUNTS PAYABLE

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	13-AUG-10	12.00	97.50	1,170.00
Callahan, Colin P	P12	20-AUG-10	1.00	97.50	97.50
Callahan, Colin P	P12	27-AUG-10	7.00	97.50	682.50
Gregorio, Helena	P12	06-AUG-10	1.00	97.50	97.50
Mosquera, Justin L	P16	13-AUG-10	0.50	135.00	67.50
Total Labor Bill Rate			**21.50**		**2,115.00**

Unit Billing

Expenditure Type	Description	Date	Quantity	UOM	Bill Rate	Billed Amt
Field Equipment		27-APR-10	461.9	EACH	1.00	461.89

Accounting: 30.40.00.00.182.29.00
Description: Phytoremediation project work 08110 for Rochester, NH MGP

Unit Billing

Expenditure Type	Description	Date	Quantity	UOM	Bill Rate	Billed Amt
Total Unit Billing						**461.89**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Field Supplies	DYNAMAX INC	27-APR-10	18727	56.25	1.0000	56.25
Field Supplies	DYNAMAX INC	06-MAY-10	18804	20.63	1.0000	20.63
Lunch	Callahan, Colin P	11-AUG-10	EXP965070	15.43	1.0800	16.66
Rent - Equipment	ENTERPRISE RENT A CAR	15-JUL-10	D231030	76.14	1.0800	82.23
Rent - Equipment	ENTERPRISE RENT A CAR	11-AUG-10	D231356	86.62	1.0800	93.55
Rent - Vehicles	Callahan, Colin P	11-AUG-10	EXP965070	35.00	1.0800	37.80
Travel All Other	Callahan, Colin P	11-AUG-10	EXP965070	7.00	1.0800	7.56
Total Reimbursable				**297.07**		**314.68**

Task Total : EVALUATION ACTIVITIE **2,891.57**

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM **5,024.24**

Invoice Summaries

Total Current Amount :	5,024.24
Retention Amount :	0.00
Pre-Tax Amount :	5,024.24
Tax Amount :	0.00
Total Invoice Amount :	**5,024.24**

total → 5,024.24 OK

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	5,024.24	70,464.40	75,488.64		
Billing Total :	5,024.24	70,464.40	75,488.64		

AECOM
2 Technology Park Drive
Westford, MA 01886

978.589.3000 tel
978.589.3100 fax

September 8, 2010

Mr. Thomas Murphy
Unitil Services Corp.
6 Liberty Lane W
Hampton, NH 03842-1720

AECOM Ref. No.: 60139734-Inv17

RE: Invoice for Activities Related to 2010 Phytoremediation Program
Petrolane/Northern Utilities, Inc. Site (DES #198712002, Project #432)
32 Gonic Road, Rochester, NH
AECOM Project #60139734
Period Ending August 27, 2010

Dear Mr. Murphy:

Enclosed for your information is an invoice and Progress Report for professional environmental consulting services related to the 2010 Phytoremediation Program. Elements of the Phytoremediation Program include continued groundwater suppression installation and evaluation activities at the former manufactured gas plant located at the above referenced property.

Project Budget Information

This invoice is for $5,024. The total authorized budget for this project is $100,800 which includes authorizations for $51,300 and $49,500 for 2009 and 2010 phytoremediation activities, respectively. The proposal for 2010 phytoremediation activities was approved on April 20, 2010 and includes continued groundwater suppression installation and evaluation activities. This project was proposed on a time and materials basis to be billed on a monthly basis.

Work Performed

The following section briefly describes work and charges for this invoicing period for each task:

Task 0100 2010 Continued Groundwater Suppression Installation Activities

Irrigation events were performed on August 4, 11, and 27, 2010 during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in August 2010 associated with this task was $2,132.

Task 0200 2010 Continued Groundwater Suppression Evaluation Activities

AECOM downloaded data from the Thermal Dissipation Probe (TDP) Sap Velocity System and monitoring well data logger three times during this invoicing period and performed a comprehensive water level gauging round. As detailed in Table 1 and the attached invoice, the cost incurred in August 2010 associated with this task was $2,892.

If you have any questions regarding this invoice, please do not hesitate to call me at 978-589-3044. It has been a pleasure assisting you with this important project, and I look forward to providing additional services in the future.

Sincerely yours,
AECOM

Justin Mosquera
Project Manager

Attachment

Table 1 Invoice Summary
2010 Phytoremediation Program
August 2010 Billing Period

Task		Authorized Budget	2010 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	$34,200.00	$11,400.00	$22,338.23	$2,132.67	$24,470.90	$9,729.10
0200	Continued Groundwater Suppression Evaluation Activities	$66,600.00	$38,100.00	$48,126.17	$2,891.57	$51,017.74	$15,582.26
Total		**$100,800.00**	**$49,500.00**	**$70,464.40**	**$5,024.24**	**$75,488.64**	**$25,311.36**

2009 Phyto Funding $51,300, 2010 Phyto Funding $49,500.

AECOM PA Invoice Billing Backup - NonLabor

Customer Name: UNITIL SERVICES CORPORATON
Invoice Number: 37046167
Invoice Date: 03-AUG-10 to 27-AUG-10
Project: 60139734 13046004 2010 PHYTOREMEDIATION PROG

Task: 0100 INSTALLATION ACTIVIT

Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
Callahan, Colin P	Rent - Vehicles	20-JUL-10	EXP965082	851664546	60.12	1.080	64.93
Callahan, Colin P	Lunch	21-JUL-10	EXP965082	851664546	16.07	1.080	17.36
Callahan, Colin P	Travel All Other	21-JUL-10	EXP965082	851664546	7.00	1.080	7.56
Callahan, Colin P	Lunch	04-AUG-10	EXP965082	851664546	14.43	1.080	15.58
Callahan, Colin P	Rent - Vehicles	04-AUG-10	EXP965082	851664546	81.61	1.080	88.14
Callahan, Colin P	Travel All Other	04-AUG-10	EXP965082	851664546	7.00	1.080	7.56
ENTERPRISE RENT A CAR	Rent - Equipment	26-JUL-10	D231210	851654000	62.61	1.080	67.62
ENTERPRISE RENT A CAR	Rent - Equipment	11-AUG-10	D231356	851659823	86.61	1.080	93.54
US ENVIRONMENTAL RENTAL CO	Rent - Equipment	20-JUL-10	RN16442	851614954	297.50	1.080	321.30
US ENVIRONMENTAL RENTAL CO	Rent - Equipment	23-JUL-10	RN16699	851615007	31.88	1.080	34.43
US ENVIRONMENTAL RENTAL CO	Rent - Equipment	05-AUG-10	RN17296	851654044	42.50	1.080	45.90
Category Total :					707.33		763.92
Total for Task: 0100					707.33		763.92

Task: 0200 EVALUATION ACTIVITIE

Category : Unit Billing

Employee/Vendor Name	Expenditure Type	Expdt	Quantity	UOM	Rate	Billed Amt
	Field Equipment	27-APR-10	17.50	EACH	1.000	17.50
	Field Equipment	27-APR-10	232.50	EACH	1.000	232.50
	Field Equipment	27-APR-10	11.25	EACH	1.000	11.25
	Field Equipment	27-APR-10	20.63	EACH	1.000	20.63
	Field Equipment	27-APR-10	165.63	EACH	1.000	165.63
	Field Equipment	27-APR-10	14.38	EACH	1.000	14.38
Category Total :						461.89

Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
Callahan, Colin P	Lunch	11-AUG-10	EXP965070	851664551	15.43	1.080	16.66
Callahan, Colin P	Rent - Vehicles	11-AUG-10	EXP965070	851664551	35.00	1.080	37.80
Callahan, Colin P	Travel All Other	11-AUG-10	EXP965070	851664551	7.00	1.080	7.56
DYNAMAX INC	Field Supplies	27-APR-10	18727	851490896	56.25	1.000	56.25
DYNAMAX INC	Field Supplies	06-MAY-10	18804	851499541	20.63	1.000	20.63
ENTERPRISE RENT A CAR	Rent - Equipment	15-JUL-10	D231030	851653990	76.14	1.080	82.23
ENTERPRISE RENT A CAR	Rent - Equipment	11-AUG-10	D231356	851659823	86.62	1.080	93.55
Category Total :					297.07		314.68
Total for Task: 0200					758.96		776.57

Project Invoice Total:	60139734	1,466.29	1,540.49

Confirmation

Expense report number EXP965082 for 186.23 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP965082

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name **Callahan, Colin P (647972)**
Expense Dates **20-JUL-2010 - 04-AUG-2010**
Cost Center (DEPT) **5826**
Detailed Business Purpose **O&M**
Approver **Mosquera, Justin L**
Receipts Status **Required**

Report Submit Date **24-AUG-2010**
Attachments View
Report Total **186.23 USD**
Reimbursement Amount **186.23 USD**

ACM
Signature _____
I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Guest's Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
20-Jul-2010	60.12 USD	MISC-Miscellaneous	Gas		✔				60.12					
21-Jul-2010	16.07 USD	TRA-Lunch	Lunch						16.07					
21-Jul-2010	7.00 USD	MISC-Miscellaneous	Tolls						7.00					
04-Aug-2010	81.61 USD	MISC-Miscellaneous	Gas		✔				81.61					
04-Aug-2010	14.43 USD	TRA-Lunch	Lunch						14.43					
04-Aug-2010	7.00 USD	MISC-Miscellaneous	Tolls						7.00					

Total	**186.23**

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

WELCOME

T033650162-001
ROCHESTER SUNOCO
164 CHARLES STREET
ROCHESTER NH 0386

DATE 08/04/10
TIME 12:08 PM
AUTH# 548035

AMEX
ACCOUNT NUMBER
XXXX XXXXXX X1008

PUMP	PRODUCT	PPG
02	UNLD	$2.689

GALLONS	TOTAL
30.351	$81.61

8162

THANK YOU
HAVE A NICE DAY

Main Street Mobil
178 Main St.
Reading, MA 01867

Sale
#AMEX XXXXXX1008
Auth. #.548444
Inv. # T1Q6278
1349729
Date 07/20/10 21:19
MAIN ST PETRO
READING MA
Pump # 3 Regular
Gallons 22.609
Price/Gal ..$ 2.659
Fuel Sale ..$ 60.12

THANK YOU FOR
CHOOSING MOBIL

6012

WILD WILLY'S BURGERS
12 GONIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 660005130471601

Sale 1607

[redacted]8674
VISA Entry Method: Swiped

Total: $ 15.87

07/21/10 12:14:04
Inv#: 000006 Appr Code: 015388
Apprvd: Online Batch#: 000043

Customer Copy
THANK YOU!
COME AGAIN!

WILD WILLY'S
BURGERS
12 GONIC ROAD
ROCHESTER, NH
(603) 332-1193

DATE 08/04/2010 WED TIME 12:14

WILLY BURGER T1	$6.00
FRAPPE T1	$4.25
FRESH LEMON T1	$2.99
NO MAKE T1	$0.00
NO MAKE T1	$0.00
TAX1	$1.19
TOTAL	$14.43
CREDIT CARD	$14.43

1403

** ORDER# 0015 **
CLERK 1 No.152698 00002

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N2 ATTENDANT 80297
07/21/2010 10:04:46
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 79365
07/21/2010 10:20:46
Class 1 $0.75 US Cash

2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N4 ATTENDANT 69373
07/21/2010 09:54:53
Class 1 $2.00 US Cash

2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S4 ATTENDANT 79488
08/04/2010 15:35:07
Class 1 $2.00 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79571
07/21/2010 10:52:07
Class 1 $0.75 US Cash

2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N4 ATTENDANT 76303
08/04/2010 08:19:46
Class 1 $2.00 US Cash

2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S4 ATTENDANT 75389
07/21/2010 13:04:29
Class 1 $2.00 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 85054
08/04/2010 08:34:06
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 77481
07/21/2010 13:01:26
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 78342
08/04/2010 08:45:56
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 78577
08/04/2010 15:22:30
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79555
08/04/2010 15:11:[illegible]
Class 1 $0.75 US Cash

Rental Invoice

enterprise

290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Rental Agreement D231210 - 10U8

BILLING DETAIL

Description		Rate	Amount
44 MILES	@	.20	8.80
3 DAYS	@	65.00	195.00
SPECIAL	@	30.00	90.00
PKGSCH			.60
VLCREC FEE			9.00
SALES TX %		6.25	18.41

Bill To:

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS•COLI•
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886

RENTAL INFORMATION

Date Out 7/20/10 9:28AM **Date In** 7/26/10 9:11A

Renter
COLIN CALLAHAN

AECOM #: 41001
Project #: 60139734
Task #: 0100
Expenditure Type: off rent-equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 62.61
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

Additional

Name
NONE

AECOM #: 41001
Project #: 6014732D
Task #: 1
Expenditure Type: off-rent Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 125.20
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

TOTAL CHARGES	321.81
CHARGED TO OTHERS	8.80
AMOUNT DUE ▶	313.01

REN

Color	License No.	Claim #/Policy #/P.O. #
$BLUE	61718KA	CALLAHAN

Model	Unit #
10 B15Q	7D0QR4

AECOM #: 41001
Project #: 60136589
Task #: 0003
Expenditure Type: off Rent - Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 125.20
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

IMPORTANT INFORMATION

Billing Inquiries Call 978-367-0212
Fed Tax ID # 43-1526718

Information
N

k You For Choosing Enterprise

CALL 1-800-RENT-A-CAR TO ASK
ABOUT LOW WEEKEND RATES

Please Return Tl

NT DUE ▶ 313.01

Remit to:

ENTERPRISE RENT-/
ATTN: ACCTS RECEIVABLE
P.O. BOX 414373
BOSTON MA 02241-4373

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS•COLI•
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886

Customer#	Rental Agreement	Amount	GPBR
NA10F08	D231210	313.01	10U8

07/27

enterprise

290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Rental Agreement D231356 - 10U8

Bill To:

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CLOVER•MARY•
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886

BILLING DETAIL

Description		Rate	Amount
7 DAYS	@	65.00	455.00
SPECIAL	@	10.00	20.00
PKGSCH			.60
VLCREC FEE			13.50
SALES TX %		6.25	30.57

AMOUNT DUE ▶ 519.67

RENTAL INFORMATION

Date Out 8/02/10 2:09PM
Date In 8/11/10 2:09P
Renter COLIN CALLAHAN

Additional Driver

Name NONE

RENTAL VEHICLES **CLAIM INFORMATION**

Color BLACK
License No. 168HV3
Claim #/Policy #/P.O. #
Model 10 F15C
Unit # 7D42BM
Insured
Date of Loss **Type of Loss**
Type of Car **Repair Shop**

IMPORTANT INFORMATION

Billing Inquiries Call 978-367-0212
Fed Tax ID # 43-1526718
Billing Information
SEE ECARS2.0 FOR CHRG DETAILS

Thank You For Choosing Enterprise

CALL 1-800-RENT-A-CAR TO ASK
ABOUT LOW WEEKEND RATES

Please Return This Portion with Remittance

AMOUNT DUE ▶ 519.67

Remit to:

ENTERPRISE RENT-A-CAR
ATTN: ACCTS RECEIVABLE
P.O. BOX 414373
BOSTON MA 02241-4373

Paid by:

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CLOVER•MARY•
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886

Customer#	Rental Agreement	Amount	GPBR
NA10F08	D231356	519.67	10U8

08/13

AECOM #: 41001

Project #: 60147320
Task #: 1
Expenditure Type: off-rent EQUIP
PO # (if applicable): -
PO Line # (if applicable): -
Amount: $ 173.22
Date Approved: 8/24/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60139734
Task #: 0100
Expenditure Type: off-rent EQUIP
PO # (if applicable): -
PO Line # (if applicable): -
Amount: $ 86.61
Date Approved: 8/24/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60139733
Task #: 0300
Expenditure Type: off-rent EQUIP
PO # (if applicable): -
PO Line # (if applicable): -
Amount: $ 173.22
Date Approved: 8/24/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60139734
Task #: 0200
Expenditure Type: off-rent EQUIP
PO # (if applicable): -
PO Line # (if applicable): -
Amount: $ 86.62
Date Approved: 8/24/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

US Environmental Rental Corporation

U.S. Environmental Rental
166 Riverview Avenue
Waltham, MA 02453
Phone No.: 781-899-1560
Fax No.: 781-899-1561
Home Page: www.usenvironmentalr

RENTAL INVOICE

Invoice Number: RN16442
Invoice Date: 07/20/10
Page: 1

Bill
To: AECOM Environment
Accounts Payable
4840 Cox Rd.
Glen Allen, VA 23060

Ship
To: AECOM, Inc. - Westford, MA
Collin Callahan
dba AECOM Environment
2 Technology Park Drive
Westford, MA 01886

Customer ID	AECOME001	P.O. Number	6757
Ship Via	Company Delivery- 5:00PM	P.O. Date	06/15/10
Terms	Net 30 Days	Our Order No.	RR10698
Due Date	08/19/10	Salesperson	Ellen Taylor

Items Rented

Item / Description	Quantity	Rental Term	From / Thru	Unit Price	Total Price
INSLTROLL In-Situ Level Troll; 30psi	1 Each	1 Month	06/17/10 07/16/10	250.00 per Month	250.00
INSCAB600 In-Situ Cables 20FT	1 Each	1 Month	06/17/10 07/16/10	0.00 per Month	0.00
RUGGEDREAD Rugged Reader Pocket PC	1 Each	1 Day	06/17/10 06/17/10	30.00	30.00

AECOM #: 41001
Project #: 60139734
Task #: 0100
Expenditure Type: off-rent Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 297.50
Date Approved: 8/2/10
Approval Signature: [signature]
Approver's Employee #: 647772
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

Subtotal:	280.00
Tax:	17.50
Total:	297.50

US Environmental Rental Corporation

U.S. Environmental Rental
166 Riverview Avenue
Waltham, MA 02453
Phone No.: 781-899-1560
Fax No.: 781-899-1561
Home Page: www.usenvironmentalr

RENTAL INVOICE

Invoice Number: RN16699
Invoice Date: 07/23/10
Page: 1

Bill To: AECOM Environment
Accounts Payable
4840 Cox Rd.
Glen Allen, VA 23060

Ship To: AECOM, Inc. - Westford, MA
Colin Callahan
dba AECOM Environment
2 Technology Park Drive
Westford, MA 01886

Customer ID	AECOME001	P.O. Number	647972
Ship Via	Company Delivery- 5:00PM	P.O. Date	07/20/10
Terms	Net 30 Days	Our Order No.	RR12154
Due Date	08/22/10	Salesperson	Ellen Taylor

Items Rented

Item / Description	Quantity	Rental Term	From / Thru	Unit Price	Total Price
RUGGEDREAD Rugged Reader Pocket PC	1 Each	1 Day	07/21/10 07/21/10	30.00	30.00

AECOM #: 41001
Project #: 60139734
Task #: 0100
Expenditure Type: off-rent E&SP
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $297.50 31.88
Date Approved: 8/2/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

Subtotal:	30.00
Tax:	1.88
Total:	31.88

US Environmental Rental Corporation

U.S. Environmental Rental
166 Riverview Avenue
Waltham, MA 02453
Phone No.: 781-899-1560
Fax No.: 781-899-1561
Home Page: www.usenvironmentalr

RENTAL INVOICE

Invoice Number: RN17296
Invoice Date: 08/05/10
Page: 1

Bill
To: AECOM Environment
Accounts Payable
4840 Cox Rd.
Glen Allen, VA 23060

Ship
To: AECOM, Inc. - Westford, MA
Colin Callahan
dba AECOM Environment
2 Technology Park Drive
Westford, MA 01886

Customer ID	AECOME001	P.O. Number	647972
Ship Via	Company Delivery- 5:00PM	P.O. Date	07/30/10
Terms	Net 30-Days	Our Order No.	RR12702
Due Date	09/04/10	Salesperson	Ellen Taylor

Items Rented

Item / Description	Quantity	Rental Term	From / Thru	Unit Price	Total Price
RUGGEDREAD Rugged Reader Pocket PC	1 Each	1 Day	08/04/10 08/04/10	30.00	30.00
with level troll adapter					
SOLM102MP Solinst Mod 102 with Microprob	1 Each	1 Day	08/04/10 08/04/10	10.00	10.00

AECOM #: 41001
Project #: 60139734
Task #: 0100
Expenditure Type: off-rent Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 42.50
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

Subtotal:	40.00
Tax:	2.50
Total:	42.50

Confirmation

Expense report number EXP965070 for 57.43 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP965070

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	**Callahan, Colin P (647972)**	Report Submit Date	**24-AUG-2010**
Expense Dates	**11-AUG-2010 - 11-AUG-2010**	Attachments	View
Cost Center (DEPT)	**5826**	Report Total	**57.43 USD**
Detailed Business Purpose	**Irrigation**	Reimbursement Amount	**57.43 USD**
Approver	**Mosquera, Justin L**		
Receipts Status	**Required**		

ACM
Signature _____
I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
11-Aug-2010	7.00 USD	MISC-Miscellaneous	Tolls						7.00					
11-Aug-2010	35.00 USD	MISC-Miscellaneous	Gas		✔				35.00					
11-Aug-2010	15.43 USD	TRA-Lunch	Lunch						15.43					
								Total	57.43					

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N5 ATTENDANT 84329
08/11/2010 10:42:42
Class 1 $2.00 US Cash

2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S1 ATTENDANT 85005
08/11/2010 14:41:46
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 86165
08/11/2010 14:17:42
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 80219
08/11/2010 10:55:09
Class 1 $0.75 US Cash

.75

Cumberland Farms

- Original -
Receipt # 277243
Date 08/11/10 Time 03:22

AX
Acct# XXXXXXXXXXX1006
Pump Gallons Price/Gal

01 12.778 $ 2.739
Product Total Amount

UNLEAD $ 35.00
SALE - Card Swiped
Apv 527025 Seq#309332
Refer # 309332
Approval # 527025

We Appreciate
Your Business
Questions or Comments
Please Call
1-800-554-6260

3.52

****

Any Size
Hot Beverage
$.99

****

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 80831
08/11/2010 11:07:21
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S2 ATTENDANT 85053
08/11/2010 14:29:23
Class 1 $0.75 US Cash

.75

7934 8868 0926

INVOICE

1

DYNAMAX, INC.
10808 FALLSTONE RD., SUITE 350 HOUSTON, TX 77099
(281) 564-5100
FAX: (281) 564-5200

INVOICE DATE	04/27/10
INVOICE NUMBER	18727
CUSTOMER NUMBER	AECOM

SOLD TO
AECOM ENVIRONMENT
Accounts Payable
2 Technology Park Drive
Westford MA 01886

SHIP TO
AECOM ENVIRONMENT
2 Technology Park Drive
Westford MA 01886
Justin Mosquera

PURCHASE ORDER NO.	ORDER DATE	CUSTOMER NO.	SALE PERSON	SHIP VIA	DATE SHIPPED	TERMS
60139734	04/20/10	9524	7	2ND DAY AIR	04/27/10	ON SIGHT

QTY. ORDERED	QTY. SHIPPED	QTY. BACKORD.	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE	
1.00	1.00	0.00	PROBE12-DL	Sap Velocity Logger,12chnl Sys	$2,650.0000	$2,650.00	
12.00	12.00	0.00	TDP-30	THERMAL DISSIPATION PROBE,30mm	$310.0000	$3,720.00	
2.00	2.00	0.00	EXTP-25	EXTENSION CABLE 5M/25FT,W/CONN	$90.0000	$180.00	
2.00	2.00	0.00	EXTP-50	EXTENSION CABLE 5M/50ft,W/CONN	$115.0000	$230.00	
2.00	2.00	0.00	EXTP-75	EXTENSION CABLE,5M/75FT,W/CONN	$140.0000	$280.00	
2.00	2.00	0.00	EXTP-100	EXTENSION CABLE 100' W/CONN	$165.0000	$330.00	
1.00	1.00	0.00	MSX-60R	60W Solar Panel w/Mounts & Reg	$900.0000	$900.00	line 8

AECOM #: 41001
Project #: 60139734
Task #: 0200
Expenditure Type: Misc - Materials
PO # (if applicable): 6815
PO Line # (if applicable): —
Amount: $8,615
Date Approved: 5/4/10
Approval Signature: [signature]
Approver's Employee #: 647545
Approver's Phone #: 978-589-3044
Pay When Paid: Yes ___ No ✓
M09130

DYNAMAX F.E.I.No:76-0043170
Please report any shortages within 10 days.
81 lbs(kgs) 3 box(es)
Thank you for your order.

SALE AMOUNT	$8,290.00
SALES TAX	$0.00
FREIGHT	$325.00 line 8
TOTAL	$8,615.00

DYNAMAX

DYNAMAX, INC.
10808 FALLSTONE RD., SUITE 350 HOUSTON, TX 77099
(281) 564-5100
FAX: (281) 564-5200

INVOICE

1

INVOICE DATE	05/06/10
INVOICE NUMBER	18804
CUSTOMER NUMBER	AECOM

SOLD TO
AECOM ENVIRONMENT
Accounts Payable
2 Technology Park Drive
Westford MA 01886

SHIP TO
AECOM ENVIRONMENT
2 Technology Park Drive
Westford MA 01886
Justin Mosquera

PURCHASE ORDER NO.	ORDER DATE	ORDER NO.	SALES PERSON	SHIP VIA	DATE SHIPPED	TERMS
6815	05/05/10	9569	7	UPS SURFACE	05/06/10	NET 30

QTY ORDERED	QTY SHIPPED	QTY BACKORD	ITEM NUMBER	DESCRIPTION		UNIT PRICE	EXTENDED PRICE
4.00	4.00	0.00	EXTP-50	EXTENSION CABLE 5W/50ft,W/CONN		$125.0000	$500.00
-2.00	-2.00	0.00	EXTP-25	EXTENSION CABLE 5W/25FT,W/CONN	15.00% Disc	$85.0000	-$170.00

AECOM #: 41001

Project #: 60139734
Task #: 0200
Expenditure Type: Misc - Materials
PO # (if applicable): 6815
PO Line # (if applicable):
Amount: $345.00
Date Approved: 5-26-10
Approval Signature:
Approver's Employee #: 647546
Approver's Phone #: 978-589-3044
Pay When Paid: Yes ___ No ✓

1Z77X3860352886209

DYNAMAX F.E.I.No:76-0043170
Please report any shortages within 10 days.
1 lbs(kgs) 1 box(es)
Thank you for your order.

SALE AMOUNT	$330.00
SALES TAX	$0.00
FREIGHT	$15.00
TOTAL	$345.00

Rental Invoice

enterprise

290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Rental Agreement D231030 - 10U8

BILLING DETAIL

Description		Rate	Amount
2 DAYS	@	65.00	130.00
1 WEEKS	@	357.50	357.50
PKGSCH			.60
VLCREC FEE			13.50
SALES TX %		6.25	31.35

AMOUNT DUE ▶ 532.95

Bill To:

0000837-00001/00002-1-1BU08A1BF08
AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS*COLI*
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886

RENTAL INFORMATION

Date Out 7/06/10 2:13PM
Date In 7/15/10 9:00A
Renter COLIN CALLAHAN

Additional Driver

Name NONE

RENTAL VEHICLES CLAIM INFORMATION

Color	License No.	Claim #/Policy #/P.O. #
WHITE	473EN3	CALLAHAN RENTAL
Model	**Unit #**	**Insured**
09 S15E	7BYP9W	
Color	**License No.**	**Date of Loss** — **Type of Loss**
SILVER	53X306	
Model	**Unit #**	**Type of Car** **Repair Shop**
10 S15C	7C8LRH	

IMPORTANT INFORMATION

Billing Inquiries Call 978-367-0212
Fed Tax ID # 43-1526718
Billing Information CALLAHAN RENTAL

Thank You For Choosing Enterprise

CALL 1-800-RENT-A-CAR TO ASK
ABOUT LOW WEEKEND RATES

Please Return This Portion with Remittance

AMOUNT DUE ▶ 532.95

Remit to:

ENTERPRISE RENT-A-CAR
ATTN: ACCTS RECEIVABLE
P.O. BOX 414373
BOSTON MA 02241-4373

Paid by:

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS*COLI*
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886

Customer#	Rental Agreement	Amount	GPBR
NA10F08	D231030	532.95	10U8

07/17

AECOM #: 41001
Project #: 60136609
Task #: 009
Expenditure Type: off Rent- EQUIP
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 152.27
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X
M09130

AECOM #: 41001
Project #: 60139734
Task #: 0200
Expenditure Type: off rent - EQUIP
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 76.14
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X
M09130

AECOM #: 41001
Project #: 60147320
Task #: 1
Expenditure Type: off rent - EQUIP
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 152.26
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X
M09130

AECOM #: 41001
Project #: 60137978
Task #: 905
Expenditure Type: off rent - equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 76.14
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X
M09130

AECOM #: 41001
Project #: 60150694
Task #: 23.1.2
Expenditure Type: off rent equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 76.14
Date Approved: 8/20/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X
M09130

GATHERUM

4217.67

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 01-OCT-10
Invoice Number: 37049165

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60136731 **Project Name : 13046001 EXETER SEDIMENT INVESTIGATION**
Bill Through Date : 28-AUG-10 to 24-SEP-10

Task Number : 0100 **Task Name : SEDIMENT INVESTIGATI**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Hartman, Kaitlin N	P11	17-SEP-10	1.00	92.50	92.50
Total Labor Bill Rate			**1.00**		**92.50**
Task Total : SEDIMENT INVESTIGATI					**92.50**

Task Number : 0150 **Task Name : MAT PLACEMENT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCarthy, Ryan S	P14	24-SEP-10	1.00	115.00	115.00
Total Labor Bill Rate			**1.00**		**115.00**
Task Total : MAT PLACEMENT					**115.00**

Task Number : 0200 **Task Name : BATHYMETRIC SURVEY**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Mayer, Hans K	P12	03-SEP-10	0.25	97.50	24.38
Total Labor Bill Rate			**0.25**		**24.38**
Task Total : BATHYMETRIC SURVEY					**24.38**

Task Number : 0300 **Task Name : STORM SEWER INVESTIG**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Warren, Raymond C (Ray)	P12	03-SEP-10	8.00	97.50	780.00
Warren, Raymond C (Ray)	P12	17-SEP-10	7.50	97.50	731.25
Total Labor Bill Rate			**15.50**		**1,511.25**

Task Total : STORM SEWER INVESTIG 1,511.25

Task Number : 0400 **Task Name : REPORTING**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	10-SEP-10	4.00	190.00	760.00
Warren, Laura A	P15	17-SEP-10	7.00	125.00	875.00
Warren, Laura A	P15	24-SEP-10	3.00	125.00	375.00
Total Labor Bill Rate			**14.00**		**2,010.00**

Task Total : REPORTING **2,010.00**

Task Number : 0900 **Task Name : MEETINGS & PROJ.MGMT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Rodriguez, Deanna L	P12	03-SEP-10	0.75	97.50	73.13
Rodriguez, Deanna L	P12	24-SEP-10	0.50	97.50	48.75
Total Labor Bill Rate			**1.25**		**121.88**

SubConsultant

Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Subconsultant Fees	SPECTRUM ANALYTICAL INC	06-AUG-10	S1010763	102.00	1.0800	110.16
Total SubConsultant				**102.00**		**110.16**

Task Total : MEETINGS & PROJ.MGMT **232.04**

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	232.50
Total Lump Sum	**232.50**

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION **4,217.67**

Invoice Summaries

Total Current Amount :	4,217.67
Retention Amount :	0.00
Pre-Tax Amount :	4,217.67
Tax Amount :	0.00
Total Invoice Amount :	**4,217.67**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	4,217.67	183,397.89	187,615.56		
Billing Total :	4,217.67	183,397.89	187,615.56		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37045931	03-SEP-10	27,923.23
37049165	01-OCT-10	4,217.67
Outstanding Total :		32,140.90

OK TO
NO-NH
10/20/10
30-40-00-00-182-29-00

SPECTRUM ANALYTICAL, INC.
Featuring
HANIBAL TECHNOLOGY

INVOICE

To: AECOM Environment
2 Technology Park Drive
Westford, MA 01886-3140
Attn: Accounts Payable

Date: August 6, 2010
Invoice Number: S1010763
Work Order No.: SB13635
RQN #: NA

Purchase Order No.:
Client Project No.: 60139731.0900
Project Manager: Ryan McCarthy
Site Location: Exeter, NH

The following charges are due for the above indicated samples submitted on 10-Jun-10.

Matrix	Analysis	Quantity	Unit Price	Total Price
Soil/Sediment	Total Arsenic by ICP	3	$6.00	$18.00
Soil/Sediment	Total Cadmium by ICP	3	$6.00	$18.00
Soil/Sediment	Total Chromium by ICP	3	$6.00	$18.00
Soil/Sediment	Total Lead by ICP	3	$6.00	$18.00
Metals Digestion		3	$10.00	$30.00
Subtotal				**$102.00**
TOTAL AMOUNT DUE FOR SERVICES:				**$102.00**

Please remit payment to: Spectrum Analytical, Inc.
830 Silver Street
Agawam, MA 01001

Your prompt payment is greatly appreciated. Thank you for your business!

Payment Terms: Net 30 Days

AECOM #: 41001
Project #: 60139731
Task #: 0900
Expenditure Type: SUBC - SUBCONSULTANT FEES
PO # (if applicable): 7255 ACM
PO Line # (if applicable):
Amount: $102
Date Approved: 8/27/10
Approval Signature:
Approver's Employee #: 648137
Approver's Phone #: 978 589 3236
Pay When Paid: Yes X No

M09130

11 Almgren Drive • Agawam, MA 01001 • Operational Building & Sample Receiving
830 Silver Street • Agawam, MA 01001 • Administrative Offices, Volatile & Air Departments
1-800-789-9115 • 413-789-9018 • FAX 413-789-4076 • www.spectrum-analytical.com

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

Req 70153
DL
11/1/10

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

DUE IMMEDIATELY

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

Invoice Date: 13-OCT-10
Invoice Number: 37050329 Line Memo
Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734 **Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM**
Bill Through Date : 28-AUG-10 to 01-OCT-10

Task Number : 0100 **Task Name : INSTALLATION ACTIVIT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Mosquera, Justin L	P16	10-SEP-10	1.00	135.00	135.00
Tammi, Carl E	P19	24-SEP-10	0.75	180.00	135.00
Total Labor Bill Rate			**1.75**		**270.00**
Task Total : INSTALLATION ACTIVIT					**270.00**

Task Number : 0200 **Task Name : EVALUATION ACTIVITIE**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Gregorio, Helena	P12	10-SEP-10	1.00	97.50	97.50
Mosquera, Justin L	P16	03-SEP-10	0.50	135.00	67.50
Mosquera, Justin L	P16	10-SEP-10	0.25	135.00	33.75
Total Labor Bill Rate			**1.75**		**198.75**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Lunch	Callahan, Colin P	27-AUG-10	EXP981269	15.53	1.0800	16.77
Miscellaneous - Allowable	Callahan, Colin P	27-AUG-10	EXP981269	7.00	1.0800	7.56
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	25-AUG-10	RN18019	265.63	1.0800	286.88
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	31-AUG-10	RN18432	31.88	1.0800	34.43
Rent - Vehicles	Callahan, Colin P	27-AUG-10	EXP981269	44.40	1.0800	47.95
Total Reimbursable				**364.44**		**393.59**
Task Total : EVALUATION ACTIVITIE						**592.34**

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM **862.34**

Invoice Summaries

Total Current Amount :	862.34
Retention Amount :	0.00
Pre-Tax Amount :	862.34
Tax Amount :	0.00

Accounting: 30.40.00.00.182.00.00
Description: Phytoremediation activities for 3Q10 at Rochester, NH MGP

Invoice Summaries

Total Invoice Amount : **862.34**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	862.34	75,488.64	76,350.98		
Billing Total :	862.34	75,488.64	76,350.98		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37046167	07-SEP-10	5,024.24
Outstanding Total :		5,024.24

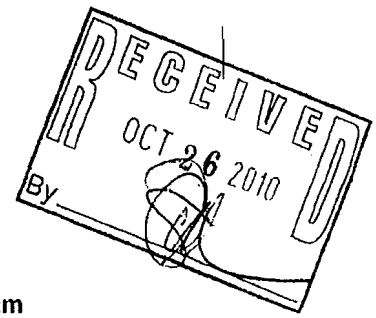
OK

AECOM
2 Technology Park Drive
Westford, MA 01886

978.589.3000 tel
978.589.3100 fax

October 14, 2010

Mr. Thomas Murphy
Unitil Services Corp.
6 Liberty Lane W
Hampton, NH 03842-1720



AECOM Ref. No.: 60139734-Inv18

RE: Invoice for Activities Related to 2010 Phytoremediation Program
Petrolane/Northern Utilities, Inc. Site (DES #198712002, Project #432)
32 Gonic Road, Rochester, NH
AECOM Project #60139734
Period Ending October 1, 2010

Dear Mr. Murphy:

Enclosed for your information is an invoice and Progress Report for professional environmental consulting services related to the 2010 Phytoremediation Program. Elements of the Phytoremediation Program include continued groundwater suppression installation and evaluation activities at the former manufactured gas plant located at the above referenced property.

Project Budget Information

This invoice is for $862. The total authorized budget for this project is $100,800 which includes authorizations for $51,300 and $49,500 for 2009 and 2010 phytoremediation activities, respectively. The proposal for 2010 phytoremediation activities was approved on April 20, 2010 and includes continued groundwater suppression installation and evaluation activities. This project was proposed on a time and materials basis to be billed on a monthly basis.

Work Performed

The following section briefly describes work and charges for this invoicing period for each task:

Task 0100 2010 Continued Groundwater Suppression Installation Activities

Minimal planning costs were incurred during this period. As detailed in Table 1 and the attached invoice, the cost incurred in September 2010 associated with this task was $270.

Task 0200 2010 Continued Groundwater Suppression Evaluation Activities

Data management and residual other direct costs were incurred during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in September 2010 associated with this task was $592.

If you have any questions regarding this invoice, please do not hesitate to call me at 978-589-3044. It has been a pleasure assisting you with this important project, and I look forward to providing additional services in the future.

Sincerely yours,
AECOM

Justin Mosquera
Project Manager

Attachment

Table 1 Invoice Summary
2010 Phytoremediation Program
September 2010 Billing Period

Task		Authorized Budget	2010 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	$34,200.00	$11,400.00	$24,470.90	$270.00	$24,740.90	$9,459.10
0200	Continued Groundwater Suppression Evaluation Activities	$66,600.00	$38,100.00	$51,017.74	$592.34	$51,610.08	$14,989.92
Total		**$100,800.00**	**$49,500.00**	**$75,488.64**	**$862.34**	**$76,350.98**	**$24,449.02**

2009 Phyto Funding $51,300, 2010 Phyto Funding $49,500.

AECOM PA Invoice Billing Backup - NonLabor

Customer Name: UNITIL SERVICES CORPORATON
Invoice Number: 37050329
Invoice Date: 28-AUG-10 to 01-OCT-10
Project: 60139734 13046004 2010 PHYTOREMEDIATION PROG

Task: 0200 EVALUATION ACTIVITIE
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
Callahan, Colin P	Lunch	27-AUG-10	EXP981269	851696990	15.53	1.080	16.77
Callahan, Colin P	Miscellaneous - Allowab	27-AUG-10	EXP981269	851696990	7.00	1.080	7.56
Callahan, Colin P	Rent - Vehicles	27-AUG-10	EXP981269	851696990	44.40	1.080	47.95
US ENVIRONMENTAL RENTAL CO	Rent - Equipment	25-AUG-10	RN18019	851669732	265.63	1.080	286.88
US ENVIRONMENTAL RENTAL CO	Rent - Equipment	31-AUG-10	RN18432	851693727	31.88	1.080	34.43
Category Total :					364.44		393.59
Total for Task: 0200					364.44		393.59

Project Invoice Total: 60139734 364.44 393.59

Confirmation

Expense report number EXP981269 for 66.93 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP981269

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	**Callahan, Colin P (647972)**	Report Submit Date	**13-SEP-2010**
Expense Dates	**27-AUG-2010 - 27-AUG-2010**	Attachments	View
Cost Center (DEPT)	**5826**	Report Total	**66.93 USD**
Detailed Business Purpose	**Data Download**	Reimbursement Amount	**66.93 USD**
Approver	**Mosquera, Justin L**		
Receipts Status	**Required**		

ACM
Signature _____
I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
27-Aug-2010	7.00 USD	MISC-Miscellaneous	tolls				+		7.00					
27-Aug-2010	44.40 USD	MISC-Miscellaneous	gas		✔		+		44.40					
27-Aug-2010	15.53 USD	TRA-Lunch	lunch				+		15.53					
								Total	66.93					

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S2 ATTENDANT 80311
08/27/2010 11:33:18
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S4 ATTENDANT 63572
08/27/2010 11:45:05
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N2 ATTENDANT 79611
08/27/2010 09:42:49
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 86165
08/27/2010 09:26:24
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N3 ATTENDANT 86070
08/27/2010 09:31:31
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79571
08/27/2010 11:21:47
Class 1 $0.75 US Cash

CREDIT RECEIPT
08/27/2010 11:56:22 DLRn992xx6 -5 01
587 LAFAYETTE SEABROOK NH 03874

Description	Qty	Price	Amount
REG UNL/FULL	16.7819 @	$2.649	$44.40
SALE TOTAL:			$44.40

AMEX $44.40
Acct/Card#: xxxxxx xxx1008
Auth #:579616
REF 16741030
RESP CODE 000 0W0C03704
CUSTOMER COPY

xxxx THANK YOU, PLEASE COME AGAIN xxx

WILD WILLY'S BURGERS
12 GONIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 660005130471601

Sale

xxxxxxxxxxxx8674
VISA Entry Method: Swiped
Total: $ 15.53
08/27/10 11:15:41
Inv#: 000002 Appr Code: 015558
Apprvd: Online Batch#: 000000

Customer Copy
THANK YOU!
COME AGAIN!

US Environmental Rental Corporation

U.S. Environmental Rental
166 Riverview Avenue
Waltham, MA 02453
Phone No.: 781-899-1560
Fax No.: 781-899-1561
Home Page: www.usenvironmentalr

RENTAL INVOICE

Invoice Number: RN18019
Invoice Date: 08/25/10
Page: 1

Bill To: AECOM Environment
Accounts Payable
4840 Cox Rd.
Glen Allen, VA 23060

Ship To: AECOM, Inc. - Westford, MA
Collin Callahan
dba AECOM Environment
2 Technology Park Drive
Westford, MA 01886

Customer ID	AECOME001	P.O. Number	6757
Ship Via	Company Delivery- 5:00PM	P.O. Date	06/15/10
Terms	Net 30 Days	Our Order No.	RR10698
Due Date	09/24/10	Salesperson	Ellen Taylor

Items Rented

Item / Description	Quantity	Rental Term	From / Thru	Unit Price	Total Price
INSLTROLL In-Situ Level Troll; 30psi	1 Each	1 Month	07/17/10 08/16/10	250.00 per Month	250.00
INSCAB600 In-Situ Cables 20FT	1 Each	1 Month	07/17/10 08/16/10	0.00 per Month	0.00

AECOM #: 41001
Project #: 60139734
Task #: 0200
Expenditure Type: off-nat EQTP
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 265.63
Date Approved: 8/27/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-392-3102
Pay When Paid: Yes ___ No X

M09130

Subtotal:	250.00
Tax:	15.63
Total:	265.63

US Environmental Rental Corporation

U.S. Environmental Rental
166 Riverview Avenue
Waltham, MA 02453
Phone No.: 781-899-1560
Fax No.: 781-899-1561
Home Page: www.usenvironmentalr

RENTAL INVOICE

Invoice Number: RN18432
Invoice Date: 08/31/10
Page: 1

Bill To: AECOM Environment
Accounts Payable
4840 Cox Rd.
Glen Allen, VA 23060

Ship To: AECOM, Inc. - Westford, MA
Collin Callahan
dba AECOM Environment
2 Technology Park Drive
Westford, MA 01886

Customer ID	AECOME001	P.O. Number	647972
Ship Via	Company Delivery- 5:00PM	P.O. Date	08/25/10
Terms	Net 30 Days	Our Order No.	RR13732
Due Date	09/30/10	Salesperson	Ellen Taylor

Items Rented

Item / Description	Quantity	Rental Term	From / Thru	Unit Price	Total Price
RUGGEDREAD Rugged Reader Pocket PC	1 Each	1 Day	08/27/10 08/27/10	30.00	30.00

AECOM #: 41001
Project #: 60139734
Task #: 0202
Expenditure Type: off-rent equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 31.88
Date Approved: 9/10/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

Subtotal:	30.00
Tax:	1.88
Total:	31.88

GATHERUM

2414.16

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 03-DEC-10
Invoice Number: 37071491

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731 **Project Name : 13046001 EXETER SEDIMENT INVESTIGATION**
Bill Through Date : 25-SEP-10 to 26-NOV-10

Task Number : 0150 **Task Name : MAT PLACEMENT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCarthy, Ryan S	P14	01-OCT-10	-1.00	115.00	-115.00
McCarthy, Ryan S	P14	15-OCT-10	0.50	115.00	57.50
Total Labor Bill Rate			**-0.50**		**-57.50**
Task Total : MAT PLACEMENT					**-57.50**

Task Number : 0300 **Task Name : STORM SEWER INVESTIG**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Warren, Raymond C (Ray)	P12	15-OCT-10	4.00	97.50	390.00
Warren, Raymond C (Ray)	P12	05-NOV-10	1.00	97.50	97.50
Total Labor Bill Rate			**5.00**		**487.50**
Task Total : STORM SEWER INVESTIG					**487.50**

Task Number : 0400 **Task Name : REPORTING**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	19-NOV-10	4.00	190.00	760.00
McCabe, Mark M	P20	26-NOV-10	1.00	190.00	190.00
McCarthy, Ryan S	P14	01-OCT-10	3.00	115.00	345.00
McCarthy, Ryan S	P14	19-NOV-10	3.50	115.00	402.50
Total Labor Bill Rate			**11.50**		**1,697.50**
Task Total : REPORTING					**1,697.50**

Task Number : 0900 **Task Name : MEETINGS & PROJ.MGMT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Cleary, Maryanne V	P13	19-NOV-10	0.50	105.00	52.50
Rodriguez, Deanna L	P12	01-OCT-10	0.25	97.50	24.38

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Rodriguez, Deanna L	P12	08-OCT-10	0.50	97.50	48.75
Rodriguez, Deanna L	P12	19-NOV-10	0.25	97.50	24.38
Total Labor Bill Rate			**1.50**		**150.01**
Task Total : MEETINGS & PROJ.MGMT					**150.01**

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	136.65
Total Lump Sum	**136.65**
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION	**2,414.16**

Invoice Summaries

Total Current Amount :	2,414.16
Retention Amount :	0.00
Pre-Tax Amount :	2,414.16
Tax Amount :	0.00
Total Invoice Amount :	**2,414.16**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	2,414.16	187,615.56	190,029.72		
Billing Total :	2,414.16	187,615.56	190,029.72		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37071491	03-DEC-10	2,414.16
Outstanding Total :		2,414.16

CK 12/13/10 NU-NH 30-40-00-00-182-29-00

GATHERUM 5392.76

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 12-JAN-11
Invoice Number: 37081501

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731 **Project Name : 13046001 EXETER SEDIMENT INVESTIGATION**
Bill Through Date : 27-NOV-10 to 31-DEC-10

Task Number : 0400 **Task Name : REPORTING**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Keough Jr, Thomas J	P14	10-DEC-10	4.00	115.00	460.00
Keough Jr, Thomas J	P14	17-DEC-10	2.00	115.00	230.00
McCabe, Mark M	P20	10-DEC-10	4.00	190.00	760.00
McCarthy, Ryan S	P14	17-DEC-10	1.00	115.00	115.00
McCarthy, Ryan S	P14	24-DEC-10	1.00	115.00	115.00
Tammi, Carl E	P19	10-DEC-10	2.00	180.00	360.00
Tammi, Carl E	P19	17-DEC-10	0.75	180.00	135.00
Warren, Laura A	P15	03-DEC-10	3.50	125.00	437.50
Total Labor Bill Rate			**18.25**		**2,612.50**

Task Total : REPORTING **2,612.50**

Task Number : 0900 **Task Name : MEETINGS & PROJ.MGMT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	17-DEC-10	9.00	190.00	1,710.00
McCabe, Mark M	P20	24-DEC-10	3.00	190.00	570.00
Rodriguez, Deanna L	P12	03-DEC-10	0.75	97.50	73.13
Rodriguez, Deanna L	P12	17-DEC-10	0.25	97.50	24.38
Rodriguez, Deanna L	P12	24-DEC-10	0.50	97.50	48.75
Rodriguez, Deanna L	P12	31-DEC-10	0.50	97.50	48.75
Total Labor Bill Rate			**14.00**		**2,475.01**

Task Total : MEETINGS & PROJ.MGMT **2,475.01**

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	305.25
Total Lump Sum	**305.25**

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION **5,392.76**

Invoice Summaries
Total Current Amount : **5,392.76**

Invoice Summaries

Retention Amount :	0.00
Pre-Tax Amount :	5,392.76
Tax Amount :	0.00
Total Invoice Amount :	**5,392.76**

OK RC 11/25/11 NU-NH

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	5,392.76	190,029.72	195,422.48		
Billing Total :	5,392.76	190,029.72	195,422.48		

30-40-00-00-182-29-00

GATHERUM 2553.28

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago, IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number 5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 08-FEB-11
Invoice Number: 37089525

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731
Bill Through Date : 01-JAN-11 to 28-JAN-11
Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0450 **Task Name : RAP PREP**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCarthy, Ryan S	P16	07-JAN-11	4.00	135.00	540.00
McCarthy, Ryan S	P16	21-JAN-11	1.00	135.00	135.00
McCarthy, Ryan S	P16	28-JAN-11	1.00	135.00	135.00
Total Labor Bill Rate			**6.00**		**810.00**
Task Total : RAP PREP					**810.00**

Task Number : 0900 **Task Name : MEETINGS & PROJ.MGMT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	07-JAN-11	2.00	190.00	380.00
McCabe, Mark M	P20	14-JAN-11	2.00	190.00	380.00
McCabe, Mark M	P20	21-JAN-11	2.00	190.00	380.00
McCabe, Mark M	P20	28-JAN-11	2.00	190.00	380.00
Rodriguez, Deanna L	P13	07-JAN-11	0.75	105.00	78.75
Total Labor Bill Rate			**8.75**		**1,598.75**
Task Total : MEETINGS & PROJ.MGMT					**1,598.75**

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 8% Labor per Contract	144.53
Total Lump Sum	**144.53**
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION	**2,553.28**

30-40-00-00782-29-00 OK 8V 6/9/11 MC-MH

Invoice Summaries

Total Current Amount :	2,553.28
Retention Amount :	0.00
Pre-Tax Amount :	2,553.28
Tax Amount :	0.00
Total Invoice Amount :	**2,553.28**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	2,553.28	195,422.48	197,975.76		
Billing Total :	2,553.28	195,422.48	197,975.76		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37089525	08-FEB-11	2,553.28
37122672	12-MAY-11	5,941.30
Outstanding Total :		8,494.58

GATHERUM 1664.20

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number 5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 07-MAR-11
Invoice Number: 37097638

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731
Bill Through Date : 29-JAN-11 to 25-FEB-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0400 Task Name : REPORTING

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Warren, Laura A	P16	25-FEB-11	1.00	135.00	135.00
Total Labor Bill Rate			1.00		135.00
Task Total : REPORTING					135.00

Task Number : 0900 Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	04-FEB-11	2.00	190.00	380.00
McCabe, Mark M	P20	11-FEB-11	4.00	190.00	760.00
McCabe, Mark M	P20	25-FEB-11	1.00	190.00	190.00
Rodriguez, Deanna L	P13	04-FEB-11	0.75	105.00	78.75
Rodriguez, Deanna L	P13	25-FEB-11	0.25	105.00	26.25
Total Labor Bill Rate			8.00		1,435.00
Task Total : MEETINGS & PROJ.MGMT					1,435.00

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	94.20
Total Lump Sum	94.20
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION	1,664.20

OK RV 3/14/11 NU-NLD

30-40-00-00-182-24-00

Invoice Summaries

Total Current Amount :	1,664.20
Retention Amount :	0.00
Pre-Tax Amount :	1,664.20
Tax Amount :	0.00
Total Invoice Amount :	1,664.20

RECEIVED
MAR 16 2011
ACCO

GATHERUM

1918.00

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago, IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number 5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 31-MAR-11
Invoice Number: 37105223

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731 **Project Name : 13046001 EXETER SEDIMENT INVESTIGATION**
Bill Through Date : 26-FEB-11 to 25-MAR-11

Task Number : 0400 **Task Name : REPORTING**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Warren, Laura A	P16	04-MAR-11	2.00	135.00	270.00
Warren, Laura A	P16	11-MAR-11	2.00	135.00	270.00
Warren, Laura A	P16	18-MAR-11	3.00	135.00	405.00
Total Labor Bill Rate			**7.00**		**945.00**
Task Total : REPORTING					**945.00**

Task Number : 0900 **Task Name : MEETINGS & PROJ.MGMT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	11-MAR-11	2.00	190.00	380.00
McCabe, Mark M	P20	18-MAR-11	2.00	190.00	380.00
Rodriguez, Deanna L	P13	04-MAR-11	0.25	105.00	26.25
Rodriguez, Deanna L	P13	11-MAR-11	0.50	105.00	52.50
Rodriguez, Deanna L	P13	25-MAR-11	0.25	105.00	26.25
Total Labor Bill Rate			**5.00**		**865.00**
Task Total : MEETINGS & PROJ.MGMT					**865.00**

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	108.60
Total Lump Sum	**108.60**

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION **1,918.60**

Invoice Summaries

Total Current Amount :	1,918.60
Retention Amount :	0.00
Pre-Tax Amount :	1,918.60
Tax Amount :	0.00
Total Invoice Amount :	**1,918.60**

RECEIVED

ACCOUNTING

OK
4/18/11
DC-RH

30-40-00-00-182-29-00

GATHERUM 5941.30

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago, IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number 5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : TOM GATHERUM, LOSS CONTROL MGR.
UNITIL SERVICES CORPORATON
5 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 12-MAY-11
Invoice Number: 37122672

Agreement Number: EM13046001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731
Bill Through Date : 26-MAR-11 to 29-APR-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0100 Task Name : SEDIMENT INVESTIGATI

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Hartman, Kaitlin N	P12	22-APR-11	3.50	97.50	341.25
Total Labor Bill Rate			3.50		341.25
Task Total : SEDIMENT INVESTIGATI					341.25

Task Number : 0400 Task Name : REPORTING

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Gardner, Michael J (Mike)	P19	29-APR-11	4.00	180.00	720.00
Warren, Laura A	P16	01-APR-11	2.00	135.00	270.00
Warren, Laura A	P16	29-APR-11	5.00	135.00	675.00
Total Labor Bill Rate			11.00		1,665.00
Task Total : REPORTING					1,665.00

Task Number : 0450 Task Name : RAP PREP

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCarthy, Ryan S	P16	08-APR-11	1.00	135.00	135.00
McCarthy, Ryan S	P16	22-APR-11	5.50	135.00	742.50
McCarthy, Ryan S	P16	29-APR-11	5.50	135.00	742.50
Total Labor Bill Rate			12.00		1,620.00
Task Total : RAP PREP					1,620.00

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	01-APR-11	2.00	190.00	380.00
McCabe, Mark M	P20	08-APR-11	2.00	190.00	380.00
McCabe, Mark M	P20	15-APR-11	1.00	190.00	190.00
McCabe, Mark M	P20	22-APR-11	1.00	190.00	190.00
McCabe, Mark M	P20	29-APR-11	4.00	190.00	760.00
Rodriguez, Deanna L	P13	01-APR-11	0.75	105.00	78.75
Total Labor Bill Rate			10.75		1,978.75

Task Total : MEETINGS & PROJ.MGMT 1,978.75

Lump Sum

Description	Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract	336.30
Total Lump Sum	336.30

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION 5,941.30

Invoice Summaries

Total Current Amount :	5,941.30
Retention Amount :	0.00
Pre-Tax Amount :	5,941.30
Tax Amount :	0.00
Total Invoice Amount :	5,941.30

OK 5/16/11 NU-NH 30-40-00-00-182-29-00

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	5,941.30	201,558.56	207,499.86		
Billing Total :	5,941.30	201,558.56	207,499.86		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37089525	08-FEB-11	2,553.28
Outstanding Total :		2,553.28

reg 71488
DL
12/1/10

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

DUE 12/08/10

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

Invoice Date: 05-NOV-10
Invoice Number: 94370532165 Line memo
Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734 **Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM**
Bill Through Date : 02-OCT-10 to 29-OCT-10

Task Number : 0100 **Task Name : INSTALLATION ACTIVIT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	08-OCT-10	11.00	97.50	1,072.50
Mosquera, Justin L	P16	08-OCT-10	1.00	135.00	135.00
Mosquera, Justin L	P16	15-OCT-10	0.50	135.00	67.50
Pelletier, Peter A	P13	08-OCT-10	6.00	105.00	630.00
Pelletier, Peter A	P13	08-OCT-10	2.00	105.00	210.00
Total Labor Bill Rate			**20.50**		**2,115.00**

Task Total : INSTALLATION ACTIVIT **2,115.00**

Task Number : 0200 **Task Name : EVALUATION ACTIVITIE**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	15-OCT-10	3.00	97.50	292.50
Gregorio, Helena	P12	15-OCT-10	1.00	97.50	97.50
Mosquera, Justin L	P16	08-OCT-10	0.50	135.00	67.50
Mosquera, Justin L	P16	15-OCT-10	0.50	135.00	67.50
Mosquera, Justin L	P16	29-OCT-10	0.50	135.00	67.50
Pelletier, Peter A	P13	08-OCT-10	2.00	105.00	210.00
Total Labor Bill Rate			**7.50**		**802.50**

RECEIVED
DEC - 2 2010

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	13-OCT-10	RN20241	265.63	1.0800	286.88
Rent - Equipment	PALMS ENVIRONMENTAL & SURVEY	15-OCT-10	14753	26.56	1.0800	28.68
Total Reimbursable				**292.19**		**315.56**

Task Total : EVALUATION ACTIVITIE **1,118.06**

RECEIVED
NOV 19
By

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM **3,233.06**

Invoice Summaries

Total Current Amount :	3,233.06
Retention Amount :	0.00

Accounting: 30.40.00.00.182.29.00
Description: 2010 Phytoremediation Project for Rochester, NH MGP

Invoice Summaries

Pre-Tax Amount :	3,233.06
Tax Amount :	0.00
Total Invoice Amount :	**3,233.06**

OK

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	3,233.06	76,350.98	79,584.04		
Billing Total :	3,233.06	76,350.98	79,584.04		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37050329	13-OCT-10	862.34
Outstanding Total :		862.34

AECOM
2 Technology Park Drive
Westford, MA 01886

978.589.3000 tel
978.589.3100 fax

November 5, 2010

Mr. Thomas Murphy
Unitil Services Corp.
6 Liberty Lane W
Hampton, NH 03842-1720

AECOM Ref. No.: 60139734-Inv19

RE: Invoice for Activities Related to 2010 Phytoremediation Program
Petrolane/Northern Utilities, Inc. Site (DES #198712002, Project #432)
32 Gonic Road, Rochester, NH
AECOM Project #60139734
Period Ending October 29, 2010

Dear Mr. Murphy:

Enclosed for your information is an invoice and Progress Report for professional environmental consulting services related to the 2010 Phytoremediation Program. Elements of the Phytoremediation Program include continued groundwater suppression installation and evaluation activities at the former manufactured gas plant located at the above referenced property.

Project Budget Information

This invoice is for $3,233. The total authorized budget for this project is $100,800 which includes authorizations for $51,300 and $49,500 for 2009 and 2010 phytoremediation activities, respectively. The proposal for 2010 phytoremediation activities was approved on April 20, 2010 and includes continued groundwater suppression installation and evaluation activities. This project was proposed on a time and materials basis to be billed on a monthly basis.

Work Performed

The following section briefly describes work and charges for this invoicing period for each task:

Task 0100 2010 Continued Groundwater Suppression Installation Activities

The irrigation system was winterized during this invoicing period. The water connection was terminated for the winter. As detailed in Table 1 and the attached invoice, the cost incurred in October 2010 associated with this task was $2,115.

Task 0200 2010 Continued Groundwater Suppression Evaluation Activities

Data management and residual other direct costs were incurred during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in October 2010 associated with this task was $1,118.

If you have any questions regarding this invoice, please do not hesitate to call me at 978-589-3044. It has been a pleasure assisting you with this important project, and I look forward to providing additional services in the future.

Sincerely yours,
AECOM

Justin Mosquera
Project Manager

Attachment

Table 1 Invoice Summary
2010 Phytoremediation Program
October 2010 Billing Period

Task		Authorized Budget	2010 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	$34,200.00	$11,400.00	$24,740.90	$2,115.00	$26,855.90	$7,344.10
0200	Continued Groundwater Suppression Evaluation Activities	$66,600.00	$38,100.00	$51,610.08	$1,118.06	$52,728.14	$13,871.86
Total		**$100,800.00**	**$49,500.00**	**$76,350.98**	**$3,233.06**	**$79,584.04**	**$21,215.96**

2009 Phyto Funding $51,300, 2010 Phyto Funding $49,500.

AECOM PA Invoice Billing Backup - NonLabor

Customer Name: UNITIL SERVICES CORPORATON
Invoice Number: 94370532165
Invoice Date: 02-OCT-10 to 29-OCT-10
Project: 60139734 13046004 2010 PHYTOREMEDIATION PROG

Task: 0200 EVALUATION ACTIVITIE
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
PALMS ENVIRONMENTAL & SURV	Rent - Equipment	15-OCT-10	14753	851772917	26.56	1.080	28.68
US ENVIRONMENTAL RENTAL CO	Rent - Equipment	13-OCT-10	RN20241	851772960	265.63	1.080	286.88
Category Total :					292.19		315.56
Total for Task: 0200					292.19		315.56
Project Invoice Total: 60139734					292.19		315.56

US Environmental Rental Corporation

U.S. Environmental Rental
166 Riverview Avenue
Waltham, MA 02453
Phone No.: 781-899-1560
Fax No.: 781-899-1561
Home Page: www.usenvironmentalr

RENTAL INVOICE

Invoice Number: RN20241
Invoice Date: 10/13/10
Page: 1

Bill
To: AECOM Environment
Accounts Payable
4840 Cox Rd.
Glen Allen, VA 23060

Ship
To: AECOM, Inc. - Westford, MA
Collin Callahan
dba AECOM Environment
2 Technology Park Drive
Westford, MA 01886

Customer ID	AECOME001	P.O. Number	6757
Ship Via	Company Delivery-5:00PM	P.O. Date	06/15/10
Terms	Net 30 Days	Our Order No.	RR10698
Due Date	11/12/10	Salesperson	Ellen Taylor

Items Rented

Item / Description	Quantity	Rental Term	From / Thru	Unit Price	Total Price
INSLTROLL In-Situ Level Troll; 30psi	1 Each	Final	09/17/10 10/08/10	250.00	250.00
INSCAB600 In-Situ Cables 20FT	1 Each	Final	09/17/10 10/08/10	0.00	0.00

full amount? OK 11/29/10

AECOM #: 41001
Project #: 60139734
Task #: 0200
Expenditure Type: off-rent Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 265.63
Date Approved: 10/25/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

Subtotal:	250.00
Tax:	15.63
Total:	265.63

INVOICE

DATE	INVOICE #
10/15/2010	14753

BILL TO:	SHIP TO:
AECOM 2 Technology Drive Westford, MA 01886	Customer P/U Attn: Colin Callahan

P.O. NUMBER	TERMS	SHIP DATE	SHIP VIA	PROJECT #	JOB NAME
60139734-0200	Net 30	10/7/2010	Cust PU		

RENTAL DAYS / QTY	DESCRIPTION	COST	EXTENSION
1	Rental charges for In-Situ Rugged Reader, S/N-1001, from 10/8/10 to 10/8/10 at $25.00/ONE RATE DAILY for 1 day.	25.00	25.00T
	Sales Tax	6.25%	1.56

AECOM #: 41001
Project #: 60139734
Task #: 0200
Expenditure Type: off rent EQUIP
PO # (if applicable): -
PO Line # (if applicable): -
Amount: $ 26.56
Date Approved: 10/25/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-509-3102
Pay When Paid: Yes ___ No X

M09130

TOTAL AMOUNT DUE **$26.56**

PALMS Environmental... working hard EVERYDAY to earn your business!

Thank you for renting with PALMS Environmental, LLC where you will find friendly and personalized service since 1999.

PALMS Environmental, LLC

274 Main Street Suite 101
Reading, MA 01867
Voice: 781-944-4709
Fax: 781-942-2748

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141
(617) 621-6500

EIN: 04-2988950

July 26, 2010

Unitil Service Corp.
Attn: Tom Gatherum, Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 91392 / 1383-5043

In Reference To: EXETERNHENV

Professional Services			Hours	Amount
6/8/2010	CMG	Email from Exeter re proposed edits. Email with client re status and forward client draft agreement. Conference with APK re same.	0.50	162.50
6/8/2010	APK	Conference with CMG re: Town's email, meeting [.1].	0.10	45.00
6/14/2010	CMG	Review series of emails between client and Town re indemnification issue	0.10	32.50
6/15/2010	CMG	Voicemail from counsel for Exeter re indemnification issue. Email with client re town comments on agreement. Email with APK re same	0.30	97.50
6/15/2010	APK	Email from Vlasich, CMG re: open issues, next steps [.1].	0.10	45.00
6/18/2010	CMG	Telephone call with town counsel for Town of Exeter re indemnification issues. Email with client and APK re same	0.30	97.50
6/18/2010	APK	Emails from and to CMG re: town indemnification in NH [.1].	0.10	45.00
6/22/2010	CMG	Telephone call with town counsel re indemnification issue. Voicemail from client re status. Email with Town and client re same	0.30	97.50
6/23/2010	CMG	Telephone call with client re Town's proposed edits to agreement. Email from town re setting up meeting	0.20	65.00
6/23/2010	APK	Conference with CMG re: meeting wtih Town [.1].	0.10	45.00
6/24/2010	CMG	Email from Town setting up meeting with Unitil	0.10	32.50

6/28/2010	CMG	Review draft agreement and comments from Town. Telephone call with client re same	0.70	227.50
6/29/2010	CMG	Email to client re meeting with town	0.10	32.50
		Sub-total:	3.00	1,025.00
			Sub-total Fees:	1,025.00

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	2.60	325.00	845.00
Arthur P. Kreiger	0.40	450.00	180.00

Total Current Billing:	1,025.00
Previous Balance Due:	0.00
Payments Received:	0.00
Total Now Due:	1,025.00

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK AP
8/3/10
NO-NH
50-40-00-00-187-29-00

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141
(617) 621-6500
EIN: 04-2988950

August 18, 2010

Unitil Service Corp.
Attn: Tom Gatherum, Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 91771 / 1383-5043

In Reference To: EXETERNHENV

Professional Services

			Hours	Amount
7/1/2010	CMG	Email from TGatherum re: edits to contract with Exeter	0.10	32.50
7/14/2010	CMG	Email to client re status of agreement with exeter	0.10	32.50
		Sub-total:	0.20	65.00
			Sub-total Fees:	65.00

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	0.20	325.00	65.00

Total Current Billing:	65.00
Previous Balance Due:	1,025.00
Payments Received:	0.00
Total Now Due:	**1,090.00**

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK PP
8/30/10
NU-NH
REM. LGL
30-40-00-00-182-29-00

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141
(617) 621-6500
EIN: 04-2988950

January 20, 2011

Unitil Service Corp.
Attn: Tom Gatherum, Loss Control Manager
6 McGuire Street
Concord, NH 03301-4622

Reference # 94214 / 1383-5043

In Reference To: EXETERNHENV

Professional Services			Hours	Amount
12/13/2010	CMG	Email with Mark McCabe re draft agreement with Town of Exeter NH	0.30	97.50
12/14/2010	CMG	Email with Mark McCabe re draft agreement with Exeter, NH	0.20	65.00
12/22/2010	CMG	Email with Mark McCabe and Tom Gatherum re edits to Unitil agreement with Town of Exeter NH	0.20	65.00
		Sub-total:	0.70	227.50
		Sub-total Fees:		227.50

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	0.70	325.00	227.50

Payments

9/16/2010	Payment	CK #85617		65.00
			Sub-total Payments:	65.00

Total Current Billing:	227.50
Previous Balance Due:	65.00
Payments Received:	65.00
Total Now Due:	**227.50**

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK
3/28/11
NU-NH
30-40-00-00-182-29-00

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141
(617) 621-6500
EIN: 04-2988950

February 17, 2011

Unitil Service Corp.
Attn: Tom Gatherum, Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 94604 / 1383-5043

In Reference To: EXETERNHENV

Professional Services

			Hours	Amount
1/11/2011	CMG	Review of Unitil audit request letter	0.10	32.50
1/13/2011	CMG	Edit draft agreement with Exeter. Email with APK re same. Review Unitil audit letter. Conference and email with APK re same. Emails with M McCabe re same	3.50	1,137.50
1/14/2011	CMG	Email with M McCabe re agreement with Exeter	0.10	32.50
1/19/2011	CMG	Email to APK re agreement with Exeter	0.10	32.50
1/20/2011	CMG	Conference with APK re edits to agreement with Exeter. Edit same. Email edited draft agreement to M McCabe	1.40	455.00
1/20/2011	APK	Review and revise Agreement w/ Town [.3]. Conference with CMG re: same [.4].	0.70	315.00
		Sub-total:	5.90	2,005.00
			Sub-total Fees:	2,005.00

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	5.20	325.00	1,690.00
Arthur P. Kreiger	0.70	450.00	315.00

30-40-00-00-182-29-00 OK 2/21/11

Total Current Billing:	2,005.00
Previous Balance Due:	227.50
Payments Received:	0.00
Total Now Due:	**2,232.50**

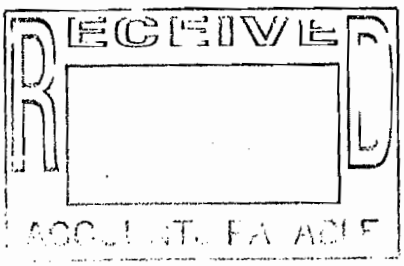
PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

INVOICE

Department of Environmental Services
Waste Management Division
Hazardous Waste Remediation Bureau

UNITIL
6 LIBERTY LANE WEST
HAMPTON NH 03042

Attn: THOMAS GATHERUM, UNITED SERVICE CORP.



Site Name: EXETER GAS WORKS
Town: EXETER
DES Site #: 198401075
DES Project #: 1801

Transactions

Billing Period: 10/01/2010 to 12/31/2010

Description	Amount
Personnel	503.02
See attached Cost Recovery Detail	

Make Checks Payable to: Treasurer, State of New Hampshire
& forward to

N.H. Department of Environmental Services
HWRB
P.O. Box 95, 29 Hazen Drive
Concord, NH 03302-0095

Please put Site Number 198401075 on the check

Previous Balance:	**$213.06**
Payments:	**$213.06**
Interest:	**$0.00**
Adjustments:	**$0.00**
Cost For New Services:	**$503.02**
Current Balance Due:	**$503.02**

INVOICE DATE: 04/11/2011

DUE DATE: 06/10/2011

If full payment is received prior to **05/11/2011** you may deduct 5% and pay only **$477.87**
[Current Balance Due - .05 * Cost for new services]

Questions should be addressed to Kimberly Durgin. Email: Kimberly.Durgin@des.nh.gov Phone: (603) 271-2908
See other side for Terms and Conditions.

OK 8
4/12/11
NWR

30-40-00 00-182-29-8

Cost Recovery Detail

For: 01-OCT-10 to 31-DEC-10

DES# 198401075

EXETER GAS WORKS

Total Cost **$503.02**

Personnel

Name	*Orgn*	*Trans Date*	*Task / Expense Desc*	*Hours*	*Cost*	*Overhead*	*Total Costs*
DUBOIS HOWARD K	2514	11/19/2010	PROJECT MANAGEMENT / DEVELOPMENT	2.00	$71.34	$117.71	$189.05
WICKSON RALPH L	2514	11/19/2010	PROJECT MANAGEMENT / DEVELOPMENT	3.50	$118.48	$195.49	$313.97
					Total Cost for Personnel Class		$503.02

The State of New Hampshire
DEPARTMENT OF ENVIRONMENTAL SERVICES

Thomas S. Burack, Commissioner

April 5, 2011

Subject: Invoice for Recovery of Department Hazardous Waste Expenses

To Whom It May Concern:

This invoice is the first round for our new quarterly invoicing system. You will be receiving future invoices during the first week of every July, October, January, and April. We hope this will help you plan for the expense.

We will be sending you an invoice every quarter even if you owe nothing or still have a credit due to a fee discount. The purpose of this practice is to keep you aware of activity at your site, and avoid surprises in the future. At your option, we can send invoices that do not have a balance electronically. Those requiring payment will always be sent in hard copy. If you wish to receive zero and negative balance invoices electronically please provide me with an e-mail address.

We appreciate your continued cooperation with the Department on the remediation of your hazardous waste site. If you have any questions, please feel free to contact me.

Thank you.

Sincerely,

Kimberly S. Durgin

Kimberly S. Durgin
Cost Recovery Coordinator
Waste Management Division
Tel: 603-271-2981
Fax: 603-271-2181
Email: kimberly.durgin@des.nh.gov

Attachment: Cost Recovery Invoice and Detail

ENPRO Services, Inc.

12 Mulliken Way, Newburyport, Massachusetts 01950
TEL. (978) 465-1595 FAX (978) 465-2050
www.enpro.com

INVOICE 08156-9

DATE: September 21, 2009

00782524

JOB NO. 6115-09

PURCHASE ORDER NO.

Unitil Services Corporation
5 McGuire Street
Concord, NH 03301

CONTACT Thomas Gatherum
Loss Control Manager

TERMS: Payment due upon receipt. An interest charge of 1½% per month (18% per annum) will be charged on all invoices over 30 days.

DESCRIPTION							AMOUNT
Project Location:	Former Lewiston Gas Works Gas Works Park Lewiston, ME 04240						
RATES ARE PORTAL-TO-PORTAL - PORTLAND, ME FOUR HOUR MINIMUM APPLIES TO ALL FIELD LABOR & EQUIPMENT							
Wednesday, August 26, 2009 - 6:00a.m. - 4:00p.m.							
In accordance with ENPRO Services, Inc. (ENPRO) Tabulation of Estimated Costs dated August 4, 2009, provided qualified personnel, equipment and material to remove damaged Geo-grid marine mattress and install new mattress. Patch and secure existing materials as requested as well as refill with ballast/rock.							
LABOR							
D. Johnson	Foreman	10.00	Hour	@	55.00		$550.00
P. McCusker	Field Technician	10.00	Hour	@	48.00		$480.00
A. Copeland	Field Technician	10.00	Hour	@	48.00		$480.00
T. Reynolds	Field Technician	10.00	Hour	@	48.00		$480.00
EQUIPMENT							
Utility Truck c/w Small Hand and Power Tools		1.00	Day	@	200.00		$200.00
6 Wheel Dump Truck		1.00	Day	@	250.00		$250.00
MATERIALS							
Uxitron 100 Type 1 - GeoGrid		1.00	Roll	@	600.00		$600.00
Uxtriton 200 Type 2 - GeoGrid		1.00	Roll	@	1050.00		$1,050.00
OP229750 HDPE Braid		1.00	Day	@	173.00		$173.00
OP135000 Bodkins		1.00	Box	@	165.00		$165.00
RipRap Rock		3.50	Yard	@	47.00		$164.50
Chute Piping		1.00	Pipe	@	325.00		$325.00
Miscellaneous		1.00	Event	@	50.00		$50.00
					5% Maine Sales Tax:		$126.38

APPROVED BY:

Should it be necessary to employ outside services to collect any amount, it is specifically agreed that the customer will pay all such cost, including reasonable attorney's fees and court costs.

TOTAL

Continued

WHITE — CUSTOMER GOLDENROD — REMITTANCE COPY

ENPRO Services, Inc.

12 Mulliken Way, Newburyport, Massachusetts 01950
TEL. (978) 465-1595 FAX (978) 465-2050
www.enpro.com

INVOICE	08156-9
DATE:	September 21, 2009
JOB NO.	6115-09
PURCHASE ORDER NO.	
CONTACT	Thomas Gatherum Loss Control Manager

00782524

Unitil Services Corporation
5 McGuire Street
Concord, NH 03301

TERMS: Payment due upon receipt. An interest charge of 1½% per month (18% per annum) will be charged on all invoices over 30 days.

DESCRIPTION	AMOUNT
Continued Pg 2	
8.25% Energy - Insurance - Security (EIS) Recovery Fee Net of Fees and Taxes:	$409.82

Should it be determined by the receiving facility that a waste stream has been received off specification from the information as profiled by the generator a surcharge will be incurred in addition to the amount invoiced.

VISA / MASTERCARD / AMERICAN EXPRESS ACCEPTED FOR INVOICE PAYMENTS
CREDIT CARD PROCESSING FEE MAY APPLY

PROJECT BILLING COMPLETE

ENPRO Appreciates Your Business

A. Marzerka

APPROVED BY:

OK 8K 9/28/09 NU-M 30-40-00-00-182-00

Should it be necessary to employ outside services to collect any amount, it is specifically agreed that the customer will pay all such cost, including reasonable attorney's fees and court costs.

TOTAL $5,503.70

WHITE — CUSTOMER GOLDENROD — REMITTANCE COPY

Attachment 3B

Rochester Invoices

Accounting: 30.40.00.00.182.29.00
Description: Phyto Remediation Project for Rochester NH MGP

7,829.70

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

RECEIVED
JUN 25 2010
By

AECOM
2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Req #65369
mw 7/2/10

Federal Tax ID No.
06-0852759

DUE IMMEDIATELY

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

~~Invoice Date: 15-JUN-10~~
Invoice Number: 37034720
Line memo

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734 **Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM**
Bill Through Date : 01-MAY-10 to 28-MAY-10

Task Number : 0100 **Task Name : INSTALLATION ACTIVIT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	30-APR-10	20.00	97.50	1,950.00
Callahan, Colin P	P12	07-MAY-10	-7.50	97.50	-731.25
Callahan, Colin P	P12	21-MAY-10	10.00	97.50	975.00
Mosquera, Justin L	P16	07-MAY-10	2.50	135.00	337.50
Myslivec, Helena	P12	07-MAY-10	1.00	97.50	97.50
Tammi, Carl E	P19	07-MAY-10	0.75	180.00	135.00
Tammi, Carl E	P19	14-MAY-10	0.75	180.00	135.00
Total Labor Bill Rate			**27.50**		**2,898.75**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Billed Amt
Lunch	Callahan, Colin P	29-APR-10	EXP753036	15.57
Lunch	Callahan, Colin P	07-MAY-10	EXP753036	27.09
Meals	Callahan, Colin P	11-MAY-10	EXP753036	3.95
Miscellaneous - Allowable	Callahan, Colin P	29-APR-10	EXP753036	99.88
Miscellaneous - Allowable	Callahan, Colin P	10-MAY-10	EXP753036	18.24
Postage & Shipping	US ACM ZERO AP	27-MAY-10	FEDEXINVOICE70	18.09
Rent - Equipment	ENTERPRISE RENT A CAR	03-MAY-10	D230071	186.25
Rent - Equipment	ENTERPRISE RENT A CAR	07-MAY-10	D230205	74.70
Rent - Vehicles	Callahan, Colin P	30-APR-10	EXP753036	39.01
Rent - Vehicles	Callahan, Colin P	06-MAY-10	EXP753036	49.99
Rent - Vehicles	Callahan, Colin P	07-MAY-10	EXP753036	43.45
Travel All Other	Callahan, Colin P	11-MAY-10	EXP753036	12.00
Total Reimbursable				**588.22**

Task Total : INSTALLATION ACTIVIT **3,486.97**

Task Number : 0200 **Task Name : EVALUATION ACTIVITIE**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Berube, Elizabeth A	P12	07-MAY-10	0.25	97.50	24.38
Callahan, Colin P	P12	07-MAY-10	20.00	97.50	1,950.00
Callahan, Colin P	P12	21-MAY-10	5.00	97.50	487.50
Mosquera, Justin L	P16	07-MAY-10	4.75	135.00	641.25
Mosquera, Justin L	P16	14-MAY-10	0.75	135.00	101.25
Mosquera, Justin L	P16	21-MAY-10	2.50	135.00	337.50
Musella, Jennifer S	P12	21-MAY-10	2.00	97.50	195.00
Total Labor Bill Rate			**35.25**		**3,736.88**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Billed Amt
Business Meeting	Mosquera, Justin L	30-APR-10	EXP739505	27.61
Mileage	Mosquera, Justin L	30-APR-10	EXP739505	74.84
Mileage	Mosquera, Justin L	07-MAY-10	EXP752991	68.04
Miscellaneous - Allowable	Mosquera, Justin L	07-MAY-10	EXP752991	29.34
Supplies	Mosquera, Justin L	30-APR-10	EXP739505	406.02
Total Reimbursable				**605.85**

Task Total : EVALUATION ACTIVITIE **4,342.73**

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM **7,829.70**

Invoice Summaries

Total Current Amount :	7,829.70
Retention Amount :	0.00
Pre-Tax Amount :	7,829.70
Tax Amount :	0.00
Total Invoice Amount :	**7,829.70**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	7,829.70	56,184.56	64,014.26		
Billing Total :	7,829.70	56,184.56	64,014.26		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37029745	10-MAY-10	12,324.06
Outstanding Total :		12,324.06

	USD	Miscellaneous	Installation			
10-May-2010	18.24 USD	1 MISC-Miscellaneous	TDP Installation	60139734 0100	18.24	
11-May-2010	29.60 USD	1 TRA-Lunch	GW Sample	60139732 0200	29.60	
11-May-2010	72.55 USD	1 MISC-Miscellaneous	GW Sample	60139732 0200	72.55	
				Total	407.88	

Expense Details Weekly Summary Approval Notes [0]

AECOM

EMPLOYEE EXPENSE REPORT

Employee No.	647972	Reimbursement Currency	USD-US Dollar
Employee Name	Colin Callahan	Business Purpose	Rochester, NH

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact th

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	29-Apr-2010	60139734	0100	O&M	YES	USD	1.0000	Westford MA	Rochester, NH		0.500	0.00							14.42	
2	30-Apr-2010	60139734	0100	TDP Installation	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00								
3	6-May-2010	60139734	0100	TDP Installation	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00								
4	7-May-2010	60139734	0100	TDP Installation	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00							25.08	
5	10-May-2010	60139734	0100	TDP Installation	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00								
6	11-May-2010	60139732	0200	GW Sample	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00							29.60	
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										0		0.00	0.00	0.00	0.00	0.00	0.00	0.00	69.10	0.00

COMPANY PAID EXPENSES

1						USD												
2						USD												
3						USD												
4						USD												
5						USD												
Total													0.00	0.00	0.00	0.00	0.00	

Employee Signature		Supervisor Approval	

» AIRS Help Desk / (866) 523-AIMS

| AECOM

EMPLOYEE EXPENSE REPORT

Employee No.	547972
Employee Name	Colin Callahan

		Other								Business Meetings			
Line No.	Total Meals (Excluding Alcohol)	Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount	Total	Guests Name	Guests Title	Organizations Name	Business Purpose
1	14.42						MISC-Miscellaneous	104.88	119.30				
2	0.00						MISC-Miscellaneous	49.87	49.87				
3	0.00						MISC-Miscellaneous	49.99	49.99				
4	25.08						MISC-Miscellaneous	43.45	68.53				
5	0.00						MISC-Miscellaneous	18.24	18.24				
6	29.80						MISC-Miscellaneous	72.55	102.15				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	68.10	0.00	0.00	0.00	0.00	0.00		338.78	407.88				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Ramp
LANE S1 ATTENDANT 76798
04/29/2010 10:42:14
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 80297
04/29/2010 10:54:04
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 85021
04/29/2010 12:47:02
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S2 ATTENDANT 79617
04/29/2010 13:58:40
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S2 ATTENDANT 79488
04/29/2010 18:12:24
Class 1 $1.00 US Cash

$2.00

Walmart
Save money. Live better.

MANAGER JAMES KORDIS
(978) 851 - 6265
ST# 2222 OP# 00006281 TE# 14 TR# 01382
BATT MAXX-29 068113107883 85.00 X
BATT CORE FE 068113107867 9.00 T
SUBTOTAL 94.00
TAX 1 6.250 % 5.88
TOTAL 99.88
VISA TEND 99.88

ACCOUNT #8674
APPROVAL #005608
TRANS ID -028011965185294G
VALIDATION -XBRH
PAYMENT SERVICE - E
CHANGE DUE 0.00

ITEMS SOLD 2

TC# 5005 3239 3335 1252 7505

**********SAVE RECEIPT**********
* RETURN OLD BATTERY FOR PROPER *
RECYCLING AND REFUND OF BATTERY
* DEPOSIT WITH THIS RECEIPT *
****

Cash your checks at Walmart and Save
$200 a year with our $3 check cashing
04/29/10 14:06:32

CUSTOMER COPY

WILD WILLY'S BURGERS
12 GONIC RD
ROCHESTER, NH 03867
603-332-1193

Sale

ID: 72087005 Ref #: 0009
04/29/10 12:22:47
Batch #: 267

VISA
[redacted]8674
Appr Code: 025258 Invoice#: 000009
Total: $ 14.42

$14.42

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S6 ATTENDANT 79807
04/30/2010 13:10:51
Class 1 $2.00 US Cash

$2.00

Welcome to Dunkin' Donuts
Store #306337
80 Macy St, Amesbury
4/30/2010 7:24:42 PM
Drive-Thru

Order Number: 658194

Register:5 Tran Seq No: 658194
Cashier:Maxwell B.

1	Wrap Bcn YEL AM	1.29
1	Ice Cof MD OrigBlnd	2.15
	Sub. Total:	$3.44
	Tax:	$0.22
	Total:	$3.66
	Discount Total:	$0.00
	Change	$0.00
	Visa:	$3.66

Visa
Card Num : XXXXXXXXXXXX8674
Terminal : 0001
Approval : 025408

I agree to pay the above Total Amount according to Card Issuer Agreement.

$3.66

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79555
04/30/2010 10:47:10
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 84757
04/30/2010 13:58:40
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 86100
04/30/2010 06:45:30
Class 1 $0.75 US Cash

$.75

Have A Great Day!

Heaths Mobile Mart
1980 Woodbury Ave
Portsmouth NH

$39.01

Sale
#AMEX XXXXXX1008
Auth. # 520424
Inv. # MS38383
9624107
Date 04/30/10 06:39
HEATHS MOBIL
PRTSMUTH NH
Pump # 14 Regular
Gallons 13.598
Price/Gal ..$ 2.869
Fuel Sale ..$ 39.01

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 77617
04/30/2010 06:56:39
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N5 ATTENDANT 77203
04/30/2010 06:20:43
Class 1 $2.00 US Cash

$2.00

THANK YOU FOR
CHOOSING MOBIL

WELCOME

T033650162-001
ROCHESTER SUNOCO
164 CHARLES STREET
ROCHESTER NH 0386

DATE 05/06/10
TIME 7:29 PM
AUTH# 529901

AMEX
ACCOUNT NUMBER
XXXX XXXXXX X1008
CALLAHAN/CP

PUMP	PRODUCT	PPG
02	UNLD	$2.859

GALLONS	TOTAL
17.486	$49.99

THANK YOU
HAVE A NICE DAY

$49.99

WILD WILLY'S BURGERS
12 GONIC RD
ROCHESTER, NH 03867
603-332-1193

Sale

ID: 72007806 Ref #: 0001
05-07-10 11:36:30
Batch #: 276

VISA
[redacted]8674
Appr Code: 035628 Invoice#: 000001
Total: $ 25.08

Customer Copy
THANK YOU

$25.08

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 85022
05/07/2010 06:51:05
Class 1 $0.75 US Cash

$0.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 78327
05/07/2010 07:02:16
Class 1 $0.75 US Cash

$0.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N6 ATTENDANT 86157
05/07/2010 16:04:37
Class 1 $2.00 US Cash

$2.00

THE HOME DEPOT

More saving.
More doing.℠

280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00056 89641 05/07/10 07:45 AM
CASHIER SELF CHECK OUT - SCOT56

938076 8X8X16 BLOCK <A>
2@1.35 36.45

SALES TAX	0.00
TOTAL	$36.45
XXXXXXXXXXXX8674 VISA	36.45
AUTH CODE 04556B/3564508	TA

3489 56 89641 05/07/2010

RETURN POLICY DEFINITIONS

	POLICY ID	DAYS	POLICY EXPIRES ON
A	1	90	08/05/2010

THE HOME DEPOT RESERVES THE RIGHT TO LIMIT / DENY RETURNS. PLEASE SEE THE RETURN POLICY SIGN IN STORE FOR DETAILS.

$36.45

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N5 ATTENDANT 78938
05/07/2010 06:38:42
Class 1 $2.00 US Cash

$2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S2 ATTENDANT 80838
05/07/2010 15:50:41
Class 1 $0.75 US Cash

$.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79365
05/07/2010 15:40:15
Class 1 $0.75 US Cash

$.75

Callahan, Colin

From: XpressMyself Accounts [billing@smartsign.com]
Sent: Wednesday, May 12, 2010 9:41 AM
To: Callahan, Colin
Subject: Order Reminder MSL-4651

This is an auto generated email please DO NOT REPLY back to this email.
If you need to write to use, please email Customer Service at customerservice@smartsign.com.

MySafetyLabels.com
32 Court Street, Suite 2200, Brooklyn, NY 11201
Questions? Call (800) 952 1457 and mention Order no. MSL-4651

Order Statement

Dear Colin Callahan,

This notification is just a friendly reminder (not a bill or a second charge) that on 5/10/2010, you placed an order MSL-4651 from MySafetyLabels.com. This order has now been shipped and therefore we have charged you. This order was paid using your VisaCard, whose last 4 digits are **********8674, and will be appearing on your billing statement shortly. The charge will appear as "SmartSign". This is just a reminder to help you recognize the charge. You will not be charged again.

Product	Quantity	Amount
Warning (ANSI): Electrical Hazard. Authorized Personnel Only (with graphic)	5 Labels	$12.25
	Subtotal	$12.25
	Shipping Charges	$5.99
	Order Total	$18.24

Shipped Via	Tracking#
UPS Ground	1Z5711860342866606

We would like to take this opportunity to thank you for your business and look forward to serving you in the future. Again, this is just a friendly purchase reminder, no response or further action is required.

*** THIS IS NOT A BILL AND IT DOES NOT INDICATE A SECOND CHARGE TO YOUR CARD ***

This is only a reminder that a previous purchase you made has now been shipped and a charge should be appearing on your credit card statement shortly.

Sincerely,

MySafetyLabels.com Team
(800) 952 1457

Confirmation

Expense report number EXP739505 for 502.93 has been submitted to Tammi, Carl E for approval.

Expense Report EXP739505

Hint:Use your browser navigation to exit the printable page view of this page.

Submission Instructions

To complete the expense report submission process, you must:
-- Print and sign the confirmation page. (Please note the page must be in landscape mode).
-- Print and sign the iExpense Excel worksheet (if you used the Excel import method).
-- Tape original receipts to an 8-1/2x11 sheet of plain white paper to support your claim for reimbursement.
-- Staple all pages together and send to the Accounts Payable department attached to a transmittal sheet (unless otherwise instructed by your supervisor).

Your electronic expense report will be submitted to your direct manager for approval. If your manager does not take action within 7 days the expense report will be escalated to his/her manager. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the Track Submitted Expense Reports region.

After the expense report is approved, the AP Department will receive an approval notification in Oracle.
AP Department will audit the paper receipts, verify the amount approved by the manager, and approve the expense report for payment.

General Information

Name	Mosquera, Justin L (647546)	Report Submit Date	04-MAY-2010
Expense Dates	30-APR-2010 - 30-APR-2010	Attachments	View
Cost Center	5826	Report Total	502.93 USD
Purpose	TDP Install	Reimbursement Amount	502.93 USD
Approver	Tammi, Carl E		
Receipts Status	Required		

AECOM
Employee Signature 647546

Expense Details Weekly Summary Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Curr.	Rate	Expense Type	Justification	Project Number	Task Number	Reimbursable Amount (USD)	Guest's Name	Organization Title	Business Purpose	Merchant Name	Expense Location	Attachments	Receipt Required	Receipt Missing	Det
30-Apr-2010	69.30 USD		1	TRA-Mileage	TDP Install	60139734	0200	69.30						+			
30-Apr-2010	27.61 USD		1	TRA-Lunch	TDP Install	60139734	0200	27.61						+	✓		
30-Apr-2010	406.02 USD		1	MISC-Miscellaneous	TDP Install	60139734	0200	406.02						+	✓		
							Total	502.93									

Expense Details Weekly Summary Approval Notes [0]

| AECOM

EMPLOYEE EXPENSE REPORT

Employee No.	647546
Employee Name	Justin Mosquera

Reimbursement Currency	USD-US Dollar
Business Purpose	TDP Install

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. **DO NOT USE cut and paste excel command (Do not use Ctrl X)**

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact t

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	30-Apr-2010	60139734	0200	TDP Install	YES	USD	1.0000			126	0.550	69.30							27.61	
2					YES	USD	1.0000				0.550	0.00								
3					YES	USD	1.0000				0.550	0.00								
4					YES	USD	1.0000				0.550	0.00								
5					YES	USD	1.0000				0.550	0.00								
6					YES	USD	1.0000				0.550	0.00								
7					YES	USD	1.0000				0.550	0.00								
8					YES	USD	1.0000				0.550	0.00								
9					YES	USD	1.0000				0.550	0.00								
10					YES	USD	1.0000				0.550	0.00								
11					YES	USD	1.0000				0.550	0.00								
12					YES	USD	1.0000				0.550	0.00								
13					YES	USD	1.0000				0.550	0.00								
14					YES	USD	1.0000				0.550	0.00								
15					YES	USD	1.0000				0.550	0.00								
16					YES	USD	1.0000				0.550	0.00								
17					YES	USD	1.0000				0.550	0.00								
18					YES	USD	1.0000				0.550	0.00								
19					YES	USD	1.0000				0.550	0.00								
20					YES	USD	1.0000				0.550	0.00								
21					YES	USD	1.0000				0.550	0.00								
22					YES	USD	1.0000				0.550	0.00								
23					YES	USD	1.0000				0.550	0.00								
24					YES	USD	1.0000				0.550	0.00								
25					YES	USD	1.0000				0.550	0.00								
Total										126		69.30	0.00	0.00	0.00	0.00	0.00	0.00	27.61	0.00

COMPANY PAID EXPENSES

1	Hannaford			14.96		USD	Home Depot		49.43									
2	Home Depot			65.21		USD	Kwik Stop		0.99									
3	Hannaford			2.83		USD	Walmart		95.32									
4	Hannaford			14.37		USD	Home Depot		1.71									
5	Home Depot			161.20		USD												
Total													0.00	0.00	0.00	0.00	0.00	

Employee Signature	647546	Supervisor Approval	

AECOM

EMPLOYEE EXPENSE REPORT

he AIMS Help Desk / (866) 823-AIMS

Employee No.	847548
Employee Name	Justin Mosquera

		Other								Business Meetings			
Line No.	Total Meals (Excluding Alcohol)	Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount	Total	Guests Name	Guests Title	Organizations Name	Business Purpose
1	27.81						MISC-Miscellaneous	406.02	502.93				
2	0.00						Select Expenditure Type		0.00				
3	0.00						Select Expenditure Type		0.00				
4	0.00						Select Expenditure Type		0.00				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	27.81	0.00	0.00	0.00	0.00	0.00		406.02	502.93				

1		#VALUE!
2		#VALUE!
3		#VALUE!
4		#VALUE!
5		0.00
Total		#VALUE!

WE VALUE YOUR OPINION!

WE WANT TO KNOW ABOUT YOUR SHOPPING EXPERIENCE TODAY AT WAL-MART.

Please complete a survey about today's store visit at:

http://www.survey.walmart.com

You will need to enter the following online:

ID #: 7BFK4CT77KQ

IN RETURN FOR YOUR TIME YOU COULD RECEIVE ONE OF FIVE $1000 WALMART SHOPPING CARDS

Must be 18 or older and a legal resident of the 50 US or DC to enter. No purchase necessary to enter or win. To enter without purchase and for complete official rules visit www.entry.survey.walmart.com. Sweepstakes period ends on the date shown in the official rules. Survey must be taken within TWO weeks of today.

Esta encuesta también se encuentra en espanol en la página del Internet

THANK YOU

Walmart

Save money. Live better.

Walmart
MANAGER GERRY ROY
(603) 332 - 4300

ST# 2330 OP# 00005424 TE# 22 TR# 03838

BATT BOX	004622147318	8.44 N
BATT 27DC-6	068113132486	70.00 N
BATT CORE FE	068113107867	9.00 O
BATTERY CABL	002989211496	3.94 N
BATTERY CABL	002989211496	3.94 N
SUBTOTAL		96.32
TOTAL		96.32
MCARD TEND		96.32

ACCOUNT #8429
APPROVAL #047653Z
PAYMENT SERVICE - A
CHANGE DUE 0.00

ITEMS SOLD 5

TC# 1537 9871 9876 5788 7748

**********SAVE RECEIPT**********
* RETURN OLD BATTERY FOR PROPER *
RECYCLING AND REFUND OF BATTERY
* DEPOSIT WITH THIS RECEIPT *
****

Tax Prep in store at Jackson Hewitt and $3 Check Cashing at Walmart
04/30/10 12:18:30

CUSTOMER COPY

THE HOME DEPOT

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280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00059 97069 04/30/10 04:02 PM
CASHIER SELF CHECK OUT - SCOT59

039923223104 FITTING <A>	1.71
SALES TAX	0.00
TOTAL	$1.71
XXXXXXXXXXXX8429 MASTERCARD	1.71
AUTH CODE 07619Z/0594205	TA

3489 59 97069 04/30/2010

RETURN POLICY DEFINITIONS

	POLICY ID	DAYS	POLICY EXPIRES ON
A	1	90	07/29/2010

THE HOME DEPOT RESERVES THE RIGHT TO LIMIT / DENY RETURNS. PLEASE SEE THE RETURN POLICY SIGN IN STORES FOR DETAILS.

GUARANTEED LOW PRICES
LOOK FOR HUNDREDS OF
LOWER PRICES STOREWIDE

THE HOME DEPOT

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280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00056 78222 04/30/10 03:49 PM
CASHIER SELF CHECK OUT - SCOT56

034481065463 2"LB <A> 2@8.47	16.94
034481061069 2 COUPLING <A> 2@0.96	2.88
034481069690 CEMENT <A>	4.41
754826044563 2 SCH40 <A S> 8@3.15	25.20
SUBTOTAL	49.43
SALES TAX	0.00
TOTAL	$49.43
XXXXXXXXXXXX8429 MASTERCARD	49.43
AUTH CODE 010892/056376	TA

3489 56 78222 04/30/2010

RETURN POLICY DEFINITIONS

POLICY ID	DAYS	POLIC. EXPIRES ON
A	90	07/ /2010

THE HOME DEPOT RESERVES THE RIGHT
LIMIT [illegible] RETURNS. PLEASE SEE THE
[illegible] FOR

WILD WILLY'S BURGERS
12 SONIC RD
ROCHESTER, NH 03867
603-332-1193

Sale

ID: 72887606 Ref #: 0007
04/30/10 12:55:31
Batch #: 268

MAST
[redacted]8429
Appr Code: 059332 Invoice#: 000007
Total: $ 27.61

for
-Justin Mosqueda
-Colin Callahan

Customer Copy
THANK YOU

WELCOME TO
KWIK STOP SUNOCO
TG53425115-001 QWIK STOP/LEE SUNOCO
100 CALEF HIGHWAY
LEE NH 03824

Descr.	qty	amount
ARIZONA TEA ARNO	1	0.99
Sub Total		0.99
Tax		0.00
TOTAL		0.99
CASH	$	1.00
Change	$	-0.01

THANKS, COME AGAIN
REG# 0001 CSH# 004 DRW 01 TRAN# 13022
04/30/10 18:58:53 STN LEE

Hannaford Food & Drug
290 North Main St - Rochester NH 03867
(603) 332-9580 - www.hannaford.com

GROCERY		
CLOROX BLEACH	1.29	
NPLC SPRNG WATER GAL	0.55	*
HEALTH & BEAUTY		
HRD PEROXIDE 3%	0.99	#
TOTAL TAX	$0.00	
BALANCE DUE	2.83	
MasterCard - FSA	2.83	
[S] **********8429		
Auth= 004792 Ref=773583589		
CHANGE	0.00	

Total number of items sold = 3
FSA Eligible Total $0.99

Hannaford Food & Drug
290 North Main St - Rochester NH 03867
(603) 332-9580 - www.hannaford.com

GROCERY		
RYNLDS HD WRP 75 SQF		
3 @ 4.79	14.37	
TOTAL TAX	$0.00	
BALANCE DUE	14.37	
MasterCard - FSA	14.37	
[S] **********8429		
Auth= 044372 Ref=773567542		
CHANGE	0.00	

Total number of items sold = 3

CASHIER NAME: Marsha K.
STORE:00315 REGISTER:005 CASHIER:0114
TICKET#:7690 30APR2010 8:41:49

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280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00056 76929 04/30/10 08:28 AM
CASHIER SELF CHECK OUT - SCOT56

722571007713 2STEPSTOOL <A>	9.97
716511516014 STAP TAB INS <A>	15.89
051131982147 TAPE <A>	
4@6.97	27.88
742366999832 FOIL TAPE <A>	7.74
049223501420 GALVWIR100 <A>	7.98
051144090150 ALUM OXIDE <A>	2.27
051144090198 ALUM OXIDE <A>	2.27
099713911475 POST DRIVER <A>	26.00
054007108283 35WHELECTAPE <A>	
2@3.78	7.56
054007061434 ELECT.TAPE <A>	3.95
054007108108 35 TAPE <A>	3.78
099167465333 3/4 2X2 BC <A>	
2@8.23	16.46
099167465302 3/8 2X2 BC <A>	5.48
988561 8N SPIKES <A>	0.45
030699095766 U-BOLT <A>	
8@1.44	11.52
030699095667 U-BOLT <A>	
8@1.50	12.00
SUBTOTAL	161.20
SALES TAX	0.00
TOTAL	$161.20
XXXXXXXXXXXX8429 MASTERCARD	161.20
AUTH CODE 07607Z/0563673	TA

3499 56 76929 04/30/2010

RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON

Hannaford Food & Drug
290 North Main St - Rochester NH 03867
(603) 332-9580 - www.hannaford.com

GROCERY

GLACEAU V/W MULTI-V	
2 @ 1.25	2.50 *
HEFTY 1ZIP GAL STG B	2.79
ZPLC EZ/ZPR ST GL	2.09
ZPLC STOR GL F PK	3.79
ZPLC STORAGE 50CT QT	3.79
TOTAL TAX	**$0.00**
BALANCE DUE	**14.96**
MasterCard - FSA	14.96
[S] ##########8429	
Auth= 049032 Ref=773684692	
CHANGE	0.00

Total number of items sold = 6

CASHIER NAME: Self Checkout Lane 4
STORE:00315 REGISTER:004 CASHIER:0504
TICKET#:5722 30APR2010 15:38:24

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280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00056 77646 04/30/10 12:41 PM
CASHIER SELF CHECK OUT - SCOT56

030699190218 PLASTBAGGDS <A>	
2@0.98	1.96
754826044457 1/2SCH40 <A,S>	
4@0.82	3.28
076174932782 37"TOOL BOX <A>	59.97
SUBTOTAL	65.21
SALES TAX	0.00
TOTAL	$65.21
XXXXXXXXXXXX8429 MASTERCARD	65.21
AUTH CODE 04386Z/0563715	TA

3489 56 77646 04/30/2010

RETURN POLICY DEFINITIONS

POLICY ID	DAYS	POLICY EXPIRES ON
A 1	90	07/29/2010

THE HOME DEPOT RESERVES THE RIGHT TO LIMIT / DENY RETURNS. PLEASE SEE THE RETURN POLICY SIGN IN STORES FOR DETAILS.

Confirmation

Expense report number EXP752991 for 98.64 has been submitted to Tammi, Carl E for approval.

Expense Report EXP752991

Hint:Use your browser navigation to exit the printable page view of this page.

41

Submission Instructions

To complete the expense report submission process, you must:
- Print and sign the confirmation page. (Please note the page must be in landscape mode).
- Print and sign the iExpense Excel worksheet (if you used the Excel import method).
- Tape original receipts to an 8-1/2x11 sheet of plain white paper to support your claim for reimbursement.
- Staple all pages together and send to the Accounts Payable department attached to a transmittal sheet (unless otherwise instructed by your supervisor).

Your electronic expense report will be submitted to your direct manager for approval. If your manager does not take action within 7 days the expense report will be escalated to his/her manager. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the Track Submitted Expense Reports region.

After the expense report is approved, the AP Department will receive an approval notification in Oracle.
AP Department will audit the paper receipts, verify the amount approved by the manager, and approve the expense report for payment.

General Information

Name	Mosquera, Justin L (647546)	Report Submit Date	12-MAY-2010
Expense Dates	07-MAY-2010 - 07-MAY-2010	Attachments	View
Cost Center	6826	Report Total	98.64 USD
Purpose	TDP Install	Reimbursement Amount	98.64 USD
Approver	Tammi, Carl E		
Receipts Status	Required		

AECOM
Employee Signature _____

Expense Details | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Curr.	Rate	Expense Type	Justification	Project Number	Task Number	Reimbursable Amount (USD)	Guest's Name	Guest's Title	Organization Name	Business Purpose	Merchant Name	Expense Location	Attachments	Receipt Required	Receipt Missing	Del
07-May-2010	69.30	USD	1	TRA-Mileage	TDP Install	60139734	0200	69.30							+			
07-May-2010	29.34	USD	1	MISC-Miscellaneous	TDP Install	60139734	0200	29.34							+	✓		
							Total	98.64										

Expense Details | Weekly Summary | Approval Notes [0]

| AECOM

EMPLOYEE EXPENSE REPORT

Employee No. 647546
Employee Name Justin Mosquera

Reimbursement Currency USD-US Dollar
Business Purpose TDP Install

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact t

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	7-May-2010	60139734	0200	TDP Install	YES	USD	1.0000			126	0.550	69.30								
2					YES	USD	1.0000				0.550	0.00								
3					YES	USD	1.0000				0.550	0.00								
4					YES	USD	1.0000				0.550	0.00								
5					YES	USD	1.0000				0.550	0.00								
6					YES	USD	1.0000				0.550	0.00								
7					YES	USD	1.0000				0.550	0.00								
8					YES	USD	1.0000				0.550	0.00								
9					YES	USD	1.0000				0.550	0.00								
10					YES	USD	1.0000				0.550	0.00								
11					YES	USD	1.0000				0.550	0.00								
12					YES	USD	1.0000				0.550	0.00								
13					YES	USD	1.0000				0.550	0.00								
14					YES	USD	1.0000				0.550	0.00								
15					YES	USD	1.0000				0.550	0.00								
16					YES	USD	1.0000				0.550	0.00								
17					YES	USD	1.0000				0.550	0.00								
18					YES	USD	1.0000				0.550	0.00								
19					YES	USD	1.0000				0.550	0.00								
20					YES	USD	1.0000				0.550	0.00								
21					YES	USD	1.0000				0.550	0.00								
22					YES	USD	1.0000				0.550	0.00								
23					YES	USD	1.0000				0.550	0.00								
24					YES	USD	1.0000				0.550	0.00								
25					YES	USD	1.0000				0.550	0.00								
Total										126		69.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

COMPANY PAID EXPENSES

1	Home Depot			29.34		USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature 647546

Supervisor Approval

AECOM

EMPLOYEE EXPENSE REPORT

he AIMS Help Desk / (866) 823-AIMS

Employee No.	647546
Employee Name	Justin Mosquera

		Other								Business Meetings			
Line No.	Total Meals (Excluding Alcohol)	Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount	Total	Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						MISC-Miscellaneous	29.34	98.64				
2	0.00						Select Expenditure Type		0.00				
3	0.00						Select Expenditure Type		0.00				
4	0.00						Select Expenditure Type		0.00				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	0.00	0.00	0.00	0.00	0.00	0.00		29.34	98.64				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

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280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00056 89773 05/07/10 09:55 AM
CASHIER SELF CHECK OUT - SCOT56

025528106355 INSERT TEE <A>	
300.94	2.82
025528105761 INSERT ELBOW <A>	
300.79	1.58
078575172057 SS CLAMP <A>	
1801.15	20.70
025528105457 COUPLING <A>	
300.44	0.88
025528106287 INSERT PLUG <A>	0.73
025528105099 INSERT FTTNG <A>	0.47
049000050714 GRAPE 32 ZER <A>	1.08
049000050349 32 OZ STRLMN <A>	1.08
SUBTOTAL	29.34
SALES TAX	0.00
TOTAL	$29.34
XXXXXXXXXXX8429 MASTERCARD	29.34
AUTH CODE 092352/3564518	TA

29.34

3489 56 89773 05/07/2010

RETURN POLICY DEFINITIONS

	POLICY ID	DAYS	POLICY EXPIRES ON
A	1	90	08/05/2010

THE HOME DEPOT RESERVES THE RIGHT TO
LIMIT [illegible]

Accounting: 30.40.00.00.182.29.00
Description: phytoremediation Project 2010 for Rochester MGP

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

NH
req. 67140
DL
8/18/10

DUE: 08/31/10

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

~~Invoice Date: 06-AUG-10~~
Invoice Number: 37041700 Line memo

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734 **Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM**
Bill Through Date : 03-JUL-10 to 02-AUG-10

Task Number : 0100 **Task Name : INSTALLATION ACTIVIT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	09-JUL-10	2.00	97.50	195.00
Callahan, Colin P	P12	16-JUL-10	3.00	97.50	292.50
Callahan, Colin P	P12	23-JUL-10	12.00	97.50	1,170.00
Mosquera, Justin L	P16	09-JUL-10	1.75	135.00	236.25
Total Labor Bill Rate			**18.75**		**1,893.75**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	15-JUL-10	RN16313	31.88	1.0800	34.43
Total Reimbursable				**31.88**		**34.43**

Task Total : INSTALLATION ACTIVIT **1,928.18**

RECEIVED
AUG 16
ACCOUNTS PAYABLE

Task Number : 0200 **Task Name : EVALUATION ACTIVITIE**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	09-JUL-10	10.00	97.50	975.00
Desai, Maya C	P16	16-JUL-10	1.00	135.00	135.00
Gregorio, Helena	P12	09-JUL-10	1.50	97.50	146.25
Kirkwood, Gemma	P12	16-JUL-10	3.75	97.50	365.63
Mosquera, Justin L	P16	16-JUL-10	0.75	135.00	101.25
Total Labor Bill Rate			**17.00**		**1,723.13**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Lunch	Callahan, Colin P	09-JUL-10	EXP924131	7.89	1.0800	8.52
Miscellaneous - Allowable	Callahan, Colin P	20-MAY-10	EXP777226	5.00	1.0800	5.40
Rent - Equipment	ENTERPRISE RENT A CAR	17-JUN-10	D230773	60.35	1.0800	65.18
Rent - Vehicles	Callahan, Colin P	19-MAY-10	EXP777226	31.06	1.0800	33.54
Rent - Vehicles	Callahan, Colin P	16-JUN-10	EXP880937	47.39	1.0800	51.18
Rent - Vehicles	Callahan, Colin P	08-JUL-10	EXP924131	57.60	1.0800	62.21
Travel All Other	Callahan, Colin P	17-JUN-10	EXP880937	7.00	1.0800	7.56
Travel All Other	Callahan, Colin P	09-JUL-10	EXP924131	7.00	1.0800	7.56
Total Reimbursable				**223.29**		**241.15**

RECEIVED
AUG 16 2010
By

Task Total : EVALUATION ACTIVITIE 1,964.28

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM 3,892.46

Invoice Summaries

Total Current Amount :	3,892.46
Retention Amount :	0.00
Pre-Tax Amount :	3,892.46
Tax Amount :	0.00
Total Invoice Amount :	**3,892.46**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	3,892.46	66,571.94	70,464.40		
Billing Total :	3,892.46	66,571.94	70,464.40		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37037075	08-JUL-10	2,557.68
Outstanding Total :		2,557.68

Confirmation

Expense report number EXP777226 for 135.22 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP777226

Hint:Use your browser navigation to exit the printable page view of this page.

Submission Instructions

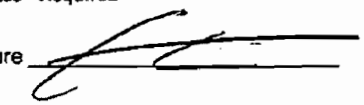
To complete the expense report submission process, you must:
-- Print and sign the confirmation page. (Please note the page must be in landscape mode).
-- Print and sign the iExpense Excel worksheet (if you used the Excel import method).
-- Tape original receipts to an 8-1/2x11 sheet of plain white paper to support your claim for reimbursement.
-- Staple all pages together and send to the Accounts Payable department attached to a transmittal sheet (unless otherwise instructed by your supervisor).

Your electronic expense report will be submitted to your direct manager for approval. If your manager does not take action within 7 days the expense report will be escalated to his/her manager. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the Track Submitted Expense Reports region.

After the expense report is approved, the AP Department will receive an approval notification in Oracle.
AP Department will audit the paper receipts, verify the amount approved by the manager, and approve the expense report for payment.

General Information

Name	**Callahan, Colin P (647972)**	Report Submit Date	**02-JUN-2010**
Expense Dates	**19-MAY-2010 - 01-JUN-2010**	Attachments	View
Cost Center	**5826**	Report Total	**135.22 USD**
Purpose	**SW Sampling & Data DL**	Reimbursement Amount	**135.22 USD**
Approver	**Mosquera, Justin L**		
Receipts Status	**Required**		

AECOM
Employee Signature 

Expense Details Weekly Summary Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Curr.	Rate	Expense Type	Justification	Project Number	Task Number	Reimbursable Amount (USD)	Guest's Name	Title	Organization Name	Business Purpose	Merchant Name	Expense Location	Attachments	Receipt Required	Receipt Missing	Details	Country
19-May-2010	31.08 USD		1	MISC-Miscellaneous	SW Sampling & Data DL	60139734	0200	31.08								✓			
20-May-2010	14.42 USD		1	TRA-Lunch	SW Sampling & Data DL	60139734	0200	14.42											
20-May-2010	5.00 USD		1	MISC-Miscellaneous	SW Sampling & Data DL	60139734	0200	5.00											
31-May-2010	50.42 USD		1	MISC-Miscellaneous	SW Sampling & Data DL	60139732	0200	50.42								✓			
01-Jun-2010	14.43		1	TRA-Lunch	SW Sampling &	60139732	0200	14.43											

	USD			Data DL												
01-Jun-2010	19.89 USD	1	MISC-Miscellaneous	SW Sampling & Data DL	60139732	0200	19.89									
						Total	135.22									

Expense Details Weekly Summary Approval Notes [0]

AECOM

EMPLOYEE EXPENSE REPORT

Employee No. 647972
Employee Name Colin Callahan

Reimbursement Currency USD-US Dollar
Business Purpose SW Sampling & Data DL

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact th

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	19-May-2010	60139734	0200	SW Sampling & Data DL	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00								
2	20-May-2010	60139734	0200	SW Sampling & Data DL	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00							14.42	
3	31-May-2010	60139732	0200	SW Sampling & Data DL	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00								
4	1-Jun-2010	60139732	0200	SW Sampling & Data DL	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00							14.43	
5					YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										0		0.00	0.00	0.00	0.00	0.00	0.00	0.00	28.85	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature

Supervisor Approval

| AECOM

EMPLOYEE EXPENSE REPORT

le AIMS Help Desk / (866) 823-AIMS

Employee No. 647972
Employee Name Colin Callahan

Line No.	Total Meals (Excluding Alcohol)	Other							Total	Business Meetings			
		Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount		Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						MISC-Miscellaneous	31.06	31.06				
2	14.42						MISC-Miscellaneous	5.00	19.42				
3	0.00						MISC-Miscellaneous	50.42	50.42				
4	14.43						MISC-Miscellaneous	19.89	34.32				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	28.85	0.00	0.00	0.00	0.00	0.00		106.37	135.22				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

WELCOME TO
Reading Car Care
Center Inc.

Reading Car Care Center
467 MAIN STREET
READING, MA 01867
DLR#: H32542365l001

05/19/10 17:48:55

Pump#: 3 /Self
Product:Regular
Gallons 10.715
$/Gal $ 2.899
Fuel Sale $ 31.06
Total Sale $ 31.06

XXXXXXXXXXX1008 #31.06
AMX

Trans# 053281
Approval# 596373

WILD WILLY'S BURGERS
12 GONIC RD
ROCHESTER, NH 03867
603-332-1193

Sale

ID: 72087006 Ref #: 0004
05/20/10 12:02:05
Batch #: 208

VISA
[redacted]8674
Appr Code: 005138 Invoice#: 000004
Total: $ 14.42

#14.42

Customer Copy
THANK YOU

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N5 ATTENDANT 78938
05/20/2010 07:48:57
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S5 ATTENDANT 77922
05/20/2010 15:09:36
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S2 ATTENDANT 86141
05/20/2010 14:55:52
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 79403
05/20/2010 08:01:49
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 79571
05/20/2010 08:13:25
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 78342
05/20/2010 14:43:25
Class 1 $0.75 US Cash

Confirmation

Expense report number EXP880937 for 68.82 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP880937

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name **Callahan, Colin P (647972)**
Expense Dates **16-JUN-2010 - 17-JUN-2010**
Cost Center (DEPT) **5826**
Detailed Business Purpose **O&M**
Approver **Mosquera, Justin L**
Receipts Status **Required**

Report Submit Date **23-JUN-2010**
Attachments View
Report Total **68.82 USD**
Reimbursement Amount **68.82 USD**

ACM Signature _____

I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
16-Jun-2010	47.39 USD	MISC-Miscellaneous	Gas		✔		✚	■	47.39					
17-Jun-2010	7.00 USD	MISC-Miscellaneous	Tolls				✚	■	7.00					
17-Jun-2010	14.43 USD	TRA-Lunch	Lunch				✚	■	14.43					
								Total	68.82					

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

| AECOM

EMPLOYEE EXPENSE REPORT

Employee No.	647972
Employee Name	Colin Callahan
Reimbursement Currency	USD-US Dollar
Business Purpose	O&M

Use these excel commands ONLY:
a. Cntrl + C - To copy the cell value
b. Cntrl + V - To paste the cell value
c. Cntrl + E - To prepare the spreadsheet for import
d. DO NOT USE cut and paste excel command (Do not use Ctrl X)

Please Note:
a. Red - Required/validated in IE Upload
b. Shared area - Protected or Selection
c. If the Area below reads ERROR please contact th

	Descriptions							Daily Itinerary		Personal Auto			Transportation			Meals / Lodging				
Line No.	Date Of Expense (mm/dd/yy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US$)	From	To	# Of Miles	Dollar per Mile	Mileage Expense	Airfare	Car Rental	Taxi, Bus, Train	Lodging Tax (Room, City, Etc.)	Lodging	Breakfast	Lunch	Dinner
1	16-Jun-2010	60139734	0200	O&M	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00								
2	17-Jun-2010	60139734	0200	O&M	YES	USD	1.0000	Westford, MA	Rochester, NH		0.500	0.00							14.43	
3					YES	USD	1.0000				0.500	0.00								
4					YES	USD	1.0000				0.500	0.00								
5					YES	USD	1.0000				0.500	0.00								
6					YES	USD	1.0000				0.500	0.00								
7					YES	USD	1.0000				0.500	0.00								
8					YES	USD	1.0000				0.500	0.00								
9					YES	USD	1.0000				0.500	0.00								
10					YES	USD	1.0000				0.500	0.00								
11					YES	USD	1.0000				0.500	0.00								
12					YES	USD	1.0000				0.500	0.00								
13					YES	USD	1.0000				0.500	0.00								
14					YES	USD	1.0000				0.500	0.00								
15					YES	USD	1.0000				0.500	0.00								
16					YES	USD	1.0000				0.500	0.00								
17					YES	USD	1.0000				0.500	0.00								
18					YES	USD	1.0000				0.500	0.00								
19					YES	USD	1.0000				0.500	0.00								
20					YES	USD	1.0000				0.500	0.00								
21					YES	USD	1.0000				0.500	0.00								
22					YES	USD	1.0000				0.500	0.00								
23					YES	USD	1.0000				0.500	0.00								
24					YES	USD	1.0000				0.500	0.00								
25					YES	USD	1.0000				0.500	0.00								
Total										0		0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.43	0.00

COMPANY PAID EXPENSES

1						USD														
2						USD														
3						USD														
4						USD														
5						USD														
Total													0.00	0.00	0.00	0.00	0.00			

Employee Signature	
Supervisor Approval	

| AECOM

EMPLOYEE EXPENSE REPORT

1s AIMS Help Desk / (866) 323-AIMS

Employee No.	647972
Employee Name	Colin Callahan

		Other								Business Meetings			
Line No.	Total Meals (Excluding Alcohol)	Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others	Others Amount	Total	Guests Name	Guests Title	Organizations Name	Business Purpose
1	0.00						MISC-Miscellaneous	47.39	47.39				
2	14.43						MISC-Miscellaneous	7.00	21.43				
3	0.00						Select Expenditure Type		0.00				
4	0.00						Select Expenditure Type		0.00				
5	0.00						Select Expenditure Type		0.00				
6	0.00						Select Expenditure Type		0.00				
7	0.00						Select Expenditure Type		0.00				
8	0.00						Select Expenditure Type		0.00				
9	0.00						Select Expenditure Type		0.00				
10	0.00						Select Expenditure Type		0.00				
11	0.00						Select Expenditure Type		0.00				
12	0.00						Select Expenditure Type		0.00				
13	0.00						Select Expenditure Type		0.00				
14	0.00						Select Expenditure Type		0.00				
15	0.00						Select Expenditure Type		0.00				
16	0.00						Select Expenditure Type		0.00				
17	0.00						Select Expenditure Type		0.00				
18	0.00						Select Expenditure Type		0.00				
19	0.00						Select Expenditure Type		0.00				
20	0.00						Select Expenditure Type		0.00				
21	0.00						Select Expenditure Type		0.00				
22	0.00						Select Expenditure Type		0.00				
23	0.00						Select Expenditure Type		0.00				
24	0.00						Select Expenditure Type		0.00				
25	0.00						Select Expenditure Type		0.00				
Total	14.43	0.00	0.00	0.00	0.00	0.00		54.39	68.82				

1		0.00
2		0.00
3		0.00
4		0.00
5		0.00
Total		0.00

WELCOME TO
Reading Car Care
Center inc.

Reading Car Care Center
487 MAIN STREET
READING, MA 01867
DLR#: H925423651001

05/16/10 18:50:08

Pump#: 3 /Self
Product:Regular
Gallons 17.238
$/Gal $ 2.749
Fuel Sale $ 47.39
Total Sale $ 47.39

XXXXXXXXXXX1008
AMX

Trans# 054875
Approval# 501722

102102s1877c3

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE 51 ATTENDANT 78342
06/17/2010 13:01:45
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N6 ATTENDANT 76303
06/17/2010 08:41:23
Class 1 $2.00 US Cash

2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 79403
06/17/2010 08:53:38
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 79571
06/17/2010 09:05:18
Class 1 $0.75 US Cash

.75

MILO MILLY'S BURGERS
12 GONIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 660051304716O1

Sale

[redacted]8674
VISA Entry Method: Swiped

Total: $ 14.43

06/17/10 12:15:45
Inv#: 000008 Appr Code: 015408
Apprvd: Online Batch#: 000011

Customer Copy
THANK YOU!
COME AGAIN!

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE 91 ATTENDANT 78611
06/17/2010 13:13:5e
Class 1 $0.75 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE 53 ATTENDANT 86174
06/17/2010 13:26:44
Class 1 $2.00 US Cash

2.00

Confirmation

Expense report number EXP924131 for 72.49 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP924131

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	**Callahan, Colin P (647972)**	Report Submit Date	**16-JUL-2010**
Expense Dates	**08-JUL-2010 - 09-JUL-2010**	Attachments	View
Cost Center (DEPT)	**5826**	Report Total	**72.49 USD**
Detailed Business Purpose	**Irrigation & TDP Data DL**	Reimbursement Amount	**72.49 USD**
Approver	**Mosquera, Justin L**		
Receipts Status	**Required**		

ACM Signature _____

I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
08-Jul-2010	57.60 USD	MISC-Miscellaneous	Gas		✓				57.60					
09-Jul-2010	7.89 USD	TRA-Lunch	Lunch						7.89					
09-Jul-2010	7.00 USD	MISC-Miscellaneous	Tolls						7.00					
								Total	72.49					

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

WELCOME TO
Reading Car Care
Center inc.

Reading Car Care Center
467 MAIN STREET
READING, MA 01867
DLR#: H32542365 1001

07/08/10 17:17:38

Pump#: 3 /Self
Product:Regular
Gallons 20.953
$/Gal $3.749
Fuel Sale $57.60
Total Sale $57.60

XXXXXXXXXXX1008
AMX

Trans# 056044
Approval# 573396

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 80831
07/09/2010 08:02:5[illegible]
Class 1 $0.75 US Cash

2.00

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S3 ATTENDANT 79480
07/09/2010 13:14:28
Class 1 $2.00 US Cash

WILD WILLY'S BURGERS
12 GONIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 660051304716O1

Sale

[redacted]8674

VISA Entry Method: Swiped

Total: $ 7.89

07/09/10 12:35:50

Inv#: 000013 Appr Code: 035588

Apprvd: Online Batch#: 000031

Customer Copy
THANK YOU!
COME AGAIN!

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 86100
07/09/2010 07:50:49
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N4 ATTENDANT 77203
07/09/2010 07:31:51
Class 1 $2.00 US Cash

.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 78342
07/09/2010 12:[illegible]
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 80297
07/09/2010 12:57:10
Class 1 $0.75 US Cash

---

req 74482
DC
1/26/11

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

RECEIVED
JAN 25 2011
By

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

Invoice Date: 13-JAN-11
Invoice Number: 37081931 Line memo

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734 **Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM**
Bill Through Date : 27-NOV-10 to 31-DEC-10

Task Number : 0100 **Task Name : INSTALLATION ACTIVIT**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Rent - Equipment	ENTERPRISE RENT A CAR	22-OCT-10	D232123	92.42	1.0800	99.81
Total Reimbursable				**92.42**		**99.81**
Task Total : INSTALLATION ACTIVIT						**99.81**

Task Number : 0200 **Task Name : EVALUATION ACTIVITIE**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Berube, Elizabeth A	P12	31-DEC-10	0.50	97.50	48.75
Kirkwood, Gemma	P12	03-DEC-10	12.50	97.50	1,218.75
Kirkwood, Gemma	P12	10-DEC-10	7.00	97.50	682.50
Kirkwood, Gemma	P12	24-DEC-10	0.75	97.50	73.13
Mosquera, Justin L	P16	24-DEC-10	1.50	135.00	202.50
Mosquera, Justin L	P16	31-DEC-10	4.25	135.00	573.75
Rodriguez, Deanna L	P12	03-DEC-10	0.50	97.50	48.75
Rodriguez, Deanna L	P12	10-DEC-10	0.50	97.50	48.76
Rodriguez, Deanna L	P12	24-DEC-10	0.25	97.50	24.38
Total Labor Bill Rate			**27.75**		**2,921.27**

RECEIVED
JAN 27 2011
ACCOUNTS PAYABLE

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Rent - Equipment	ENTERPRISE RENT A CAR	03-SEP-10	D231640	77.95	1.0800	84.19
Total Reimbursable				**77.95**		**84.19**
Task Total : EVALUATION ACTIVITIE						**3,005.46**

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM **3,105.27**

Invoice Summaries

Total Current Amount :	3,105.27
Retention Amount :	0.00
Pre-Tax Amount :	3,105.27
Tax Amount :	0.00
Total Invoice Amount :	**3,105.27**

A check received from Unitil AP was $4,161.90 more than that which was invoiced for this project. This amount is being credited. The residual credit ($4,161.90-$3,862.52=$299.38) was applied to AECOM invoice 37073104 and the remaining $299.28 is being applied to this invoice. Actual amount to be paid should be $2,805.89.

Accounting: 30.40.00.00.182.29.00 OK
Description: Phyto Remediation Project at Rochester, NH MEP

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	3,105.27	83,446.56	86,551.83		
Billing Total :	3,105.27	83,446.56	86,551.83		

Outstanding Invoices

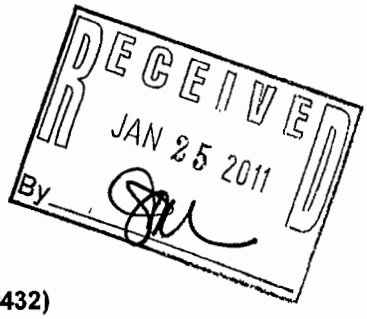
Invoice Number	Invoice Date	Invoice Balance
37073104	09-DEC-10	3,862.52
37081931	13-JAN-11	3,105.27
Outstanding Total :		6,967.79

AECOM
2 Technology Park Drive
Westford, MA 01886

978.589.3000 tel
978.589.3100 fax

January 17, 2011

Mr. Thomas Murphy
Unitil Services Corp.
6 Liberty Lane W
Hampton, NH 03842-1720



AECOM Ref. No.: 60139734-Inv21

RE: Invoice for Activities Related to 2010 Phytoremediation Program
Petrolane/Northern Utilities, Inc. Site (DES #198712002, Project #432)
32 Gonic Road, Rochester, NH
AECOM Project #60139734
Period Ending December 31, 2010

Dear Mr. Murphy:

Enclosed for your information is an invoice and Progress Report for professional environmental consulting services related to the 2010 Phytoremediation Program. Elements of the Phytoremediation Program include continued groundwater suppression installation and evaluation activities at the former manufactured gas plant located at the above referenced property.

Project Budget Information

This invoice is for $3,105.27. **DO NOT PAY THE FULL INVOICE AMOUNT – PAY $2,805.89 - AN OVERPAYMENT CREDIT OF $299.38 IS BEING APPLIED.** The total authorized budget for this project is $100,800 which includes authorizations for $51,300 and $49,500 for 2009 and 2010 phytoremediation activities, respectively. The proposal for 2010 phytoremediation activities was approved on April 20, 2010 and includes continued groundwater suppression installation and evaluation activities. This project was proposed on a time and materials basis to be billed on a monthly basis.

Work Performed

The following section briefly describes work and charges for this invoicing period for each task:

Task 0100 2010 Continued Groundwater Suppression Installation Activities

A vehicle rental charge was incurred during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in December 2010 associated with this task was $99.81.

Task 0200 2010 Continued Groundwater Suppression Evaluation Activities

AECOM has initiated the annual memorandum documenting the preliminary findings from the 2010 phytoremediation hydraulic control groundwater monitoring program. Residual other direct costs were incurred during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in December 2010 associated with this task was $3,005.46.

If you have any questions regarding this invoice, please do not hesitate to call me at 978-589-3044. It has been a pleasure assisting you with this important project, and I look forward to providing additional services in the future.

Sincerely yours,
AECOM

Justin Mosquera
Project Manager

Attachment

Table 1 Invoice Summary
2010 Phytoremediation Program
December 2010 Billing Period

Task		Authorized Budget	2010 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	$34,200.00	$11,400.00	$26,945.90	$99.81	$27,045.71	$7,154.29
0200	Continued Groundwater Suppression Evaluation Activities	$66,600.00	$38,100.00	$56,500.66	$3,005.46	$59,506.12	$7,093.88
Total		**$100,800.00**	**$49,500.00**	**$83,446.56**	**$3,105.27**	**$86,551.83**	**$14,248.17**

2009 Phyto Funding $51,300, 2010 Phyto Funding $49,500.

Do Not Pay Full Amount - An invoice credit is being applied - pay $2,805.89

AECOM PA Invoice Billing Backup - NonLabor

Customer Name: UNITIL SERVICES CORPORATON
Invoice Number: 37081931
Invoice Date: 27-NOV-10 to 31-DEC-10
Project: 60139734 13046004 2010 PHYTOREMEDIATION PROG

Task: 0100 INSTALLATION ACTIVIT
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
ENTERPRISE RENT A CAR	Rent - Equipment	22-OCT-10	D232123	851890807	92.42	1.080	99.81
Category Total :					92.42		99.81
Total for Task: 0100					92.42		99.81

Task: 0200 EVALUATION ACTIVITIE
Category : Reimbursables

Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
ENTERPRISE RENT A CAR	Rent - Equipment	03-SEP-10	D231640	851875270	77.95	1.080	84.19
Category Total :					77.95		84.19
Total for Task: 0200					77.95		84.19

Project Invoice Total: 60139734	170.37		184.00

IN 12:39PM 10/22/10
OUT 12:39PM 10/07/10

24-HOUR DAY

ENTERPRISE RENT-A-CAR COMPANY OF BOSTON, LLC
290 LITTLETON RD UNIT 9 978-367-0212
CHELMSFORD MA 01824-3300 10U8
RENTAL TYPE C SOURCE NA10F08- 009

RENTAL AGREEMENT
D232123
PAGE 1 OF 1

UNIT 1
UNIT # 7C1BQG
LIC# 47436KA
MODEL F15C
COLOR BLACK
IN 25058
OUT 23765

RENTER
COLIN CALLAHAN
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886-
LOCAL:
(H) 978-589-3102 (W) 978-621-9002
(O) 978-853-1561

DR. LICENSE XXXXX7198
STATE MA EXPIRE 1/14/11
DOB 1/14/85 HT WT
EYES HAIR
S.S.#
EMPLOYER

BILL TO Y CUST # NA10F08
AECOM INC DBA AECOM ENVIRONMEN
ATTN: CALLAHAN-HIGGINS*COLI*
2 TECHNOLOGY PARK DRIVE
WESTFORD MA
978-589-3000 01886

ADDITIONAL DRIVER
NO OTHER DRIVER PERMITTED

SUMMARY OF CHARGES
DAY = 24 HOUR PERIOD
MILES
NO CHARGE
150 MI FREE/DA
1050 MI FREE/WK
2500 MI FREE/MO

1 DAYS	@	63.00	63.00
2 WEEKS	@	346.50	693.00
PKGSCH			.60
VLCREC FEE			26.25
SALES TX		6.25	48.93

CLAIM INFO
POL/CLAIM/PO#

CALLAHAN
INSURED

LOSS DATE
THEFT ACCIDENT

TYPE CAR

SHOP
PHONE
NAME

PERMISSION TO LEAVE STATE
YES NO X

CUSTOMER SIGNATURE ON FILE

PAYMENT INFORMATION
AMOUNT PD.BY TYPE DATE AUTH

CLOSED TICKET PAYMENT INFO
CLOSED TICKET PAYMENT INFO

TOTAL CHARGES 831.78

DEPOSITS
REFUND

BILL TO CUST NA10F08 831.78

OPENED BY #188DK
CLOSED BY #718D5 THOMAS V WORKS JR

AECOM #: 41001

Project #: 60139734
Task #: 0100
Expenditure Type: off-rent Mtrls. Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 92.42
Date Approved: 12/8/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60147320
Task #: 1
Expenditure Type: off-rent Mtrls. Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 184.84
Date Approved: 12/8/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60137978
Task #: 1
Expenditure Type: off-rent Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 184.84
Date Approved: 12/8/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60137198
Task #: 1001
Expenditure Type: off-rent Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 369.68
Date Approved: 12/8/10
Approval Signature: [signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

IN 11:05AM 9/03/10
OUT 10:33AM 8/26/10

24-HOUR DAY

ENTERPRISE RENT-A-CAR COMPANY OF BOSTON, LLC
290 LITTLETON RD UNIT 9 978-367-0212
CHELMSFORD MA 01824-3300 10U8
RENTAL TYPE C SOURCE ECLAS01- 999

RENTAL AGREEMENT
D231640
PAGE 1 OF 1

UNIT 1
UNIT # 7CVVV2
LIC# 26828KA
MODEL COLC
COLOR SILVER
IN 18521
OUT 17275

RENTER
COLIN CALLAHAN
2 TECHNOLOGY PARK DRIVE
WESTFORD MA 01886-
LOCAL:
(H) 978-589-3102 (W) 978-621-9002
(O) 978-853-1561

DR. LICENSE XXXXX7198
STATE MA EXPIRE 1/14/11
DOB 1/14/85 HT WT
EYES HAIR
S.S.#
EMPLOYER

BILL TO Y CUST # NA10F08
AECOM INC DBA AECOM ENVIRONMEN
ATTN: CALLAHAN-HIGGINS*COLI*
2 TECHNOLOGY PARK DRIVE
WESTFORD MA
978-589-3000 01886

ADDITIONAL DRIVER
NONE

SUMMARY OF CHARGES
DAY = 24 HOUR PERIOD

	MILES			
150	MI FREE/DA			
1050	MI FREE/WK			
2500	MI FREE/MO			
46	MILES	@	.20	9.20
5	DAYS	@	63.00	315.00
	SPECIAL	@	10.00	30.00
	PKGSCH			.60
	VLCREC FEE			12.00
	SALES TX		6.25	22.92

CLAIM INFO
POL/CLAIM/PO#

CALLAHAN
INSURED

LOSS DATE
THEFT ACCIDENT

TYPE CAR

SHOP
PHONE
NAME

PERMISSION TO LEAVE STATE
YES X NO

STATES NEW ENGLAND
CUSTOMER SIGNATURE ON FILE

PAYMENT INFORMATION
AMOUNT PD.BY TYPE DATE AUTH

CLOSED TICKET PAYMENT INFO
CLOSED TICKET PAYMENT INFO

TOTAL CHARGES 389.72

DEPOSITS
REFUND

BILL TO CUST NA10F08 389.72

OPENED BY #188DK
CLOSED BY #188DK

AECOM #: 41001

Project #: 60161349
Task #: 1
Expenditure Type: off-rent equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 77.95
Date Approved: 12/8/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60139734
Task #: 0200
Expenditure Type: off-rent Equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 77.95
Date Approved: 12/8/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60147320
Task #: 1
Expenditure Type: off-rw equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 77.95
Date Approved: 12/8/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60160030
Task #: 2
Expenditure Type: off-rent equip
PO # (if applicable): —
PO Line # (if applicable): —
Amount: $ 155.87
Date Approved: 12/8/10
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ___ No X

M09130

PO 64025
OL
3/1/11

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

Invoice Date: 11-FEB-11
Invoice Number: 37090964

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734 **Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM**
Bill Through Date : 01-JAN-11 to 04-FEB-11

Task Number : 0100 **Task Name : INSTALLATION ACTIVIT**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Tammi, Carl E	P20	07-JAN-11	5.25	190.00	997.50
Tammi, Carl E	P20	14-JAN-11	5.75	190.00	1,092.50
Total Labor Bill Rate			**11.00**		**2,090.00**
Task Total : INSTALLATION ACTIVIT					**2,090.00**

Task Number : 0200 **Task Name : EVALUATION ACTIVITIE**

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	14-JAN-11	3.00	97.50	292.50
Desai, Maya C	P16	14-JAN-11	8.50	135.00	1,147.50
Desai, Maya C	P16	21-JAN-11	4.50	135.00	607.50
Hodge, Jodi L	P11	04-FEB-11	1.50	92.50	138.75
Kirkwood, Gemma	P13	07-JAN-11	0.75	105.00	78.75
Kirkwood, Gemma	P13	21-JAN-11	2.00	105.00	210.00
Kirkwood, Gemma	P13	28-JAN-11	0.50	105.00	52.50
Millard, Joshua C (Josh)	P14	04-FEB-11	10.00	115.00	1,150.00
Mosquera, Justin L	P17	14-JAN-11	1.75	155.00	271.25
Mosquera, Justin L	P17	21-JAN-11	1.50	155.00	232.50
Mosquera, Justin L	P17	28-JAN-11	1.75	155.00	271.25
Mosquera, Justin L	P17	04-FEB-11	3.25	155.00	503.75
Rodriguez, Deanna L	P13	07-JAN-11	0.75	105.00	78.75
Rodriguez, Deanna L	P13	14-JAN-11	0.25	105.00	26.25
Rodriguez, Deanna L	P13	04-FEB-11	2.00	105.00	210.00
Tammi, Carl E	P20	21-JAN-11	0.50	190.00	95.00
Van Naerssen, Kristoffer J	P14	21-JAN-11	1.50	115.00	172.50
Total Labor Bill Rate			**44.00**		**5,538.75**
Task Total : EVALUATION ACTIVITIE					**5,538.75**

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM **7,628.75**

Invoice Summaries

Total Current Amount :	7,628.75
Retention Amount :	0.00
Pre-Tax Amount :	7,628.75

PO 64025

Invoice Summaries

Tax Amount :	0.00
Total Invoice Amount :	**7,628.75**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	7,628.75	86,551.83	94,180.58		
Billing Total :	7,628.75	86,551.83	94,180.58		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37073104	09-DEC-10	3,862.52
37081931	13-JAN-11	299.38
37090964	11-FEB-11	7,628.75
Outstanding Total :		11,790.65

AECOM
2 Technology Park Drive
Westford, MA 01886

978.589.3000 tel
978.589.3100 fax

February 17, 2011

Mr. Thomas Murphy
Unitil Services Corp.
6 Liberty Lane W
Hampton, NH 03842-1720

AECOM Ref. No.: 60139734-Inv22

RE: Invoice for Activities Related to 2010 Phytoremediation Program
Petrolane/Northern Utilities, Inc. Site (DES #198712002, Project #432)
32 Gonic Road, Rochester, NH
AECOM Project #60139734
Period Ending February 4, 2011

Dear Mr. Murphy:

Enclosed for your information is an invoice and Progress Report for professional environmental consulting services related to the 2010 Phytoremediation Program. Elements of the Phytoremediation Program include continued groundwater suppression installation and evaluation activities at the former manufactured gas plant located at the above referenced property.

Project Budget Information

This invoice is for $7,628.75. Activities for the calendar year 2010 were completed under budget. The total authorized budget for this project is $100,800 which includes authorizations for $51,300 and $49,500 for 2009 and 2010 phytoremediation activities, respectively. The proposal for 2010 phytoremediation activities was approved on April 20, 2010 and includes continued groundwater suppression installation and evaluation activities. This project was proposed on a time and materials basis to be billed on a monthly basis.

Work Performed

The following section briefly describes work and charges for this invoicing period for each task:

Task 0100 2010 Continued Groundwater Suppression Installation Activities

Senior staff review costs for the annual memorandum documenting the preliminary findings from the 2010 phytoremediation hydraulic control groundwater monitoring program were allocated under this task. As detailed in Table 1 and the attached invoice, the cost incurred in January 2011 associated with this task was $2,090.00.

Task 0200 2010 Continued Groundwater Suppression Evaluation Activities

AECOM completed the annual memorandum documenting the preliminary findings from the 2010 phytoremediation hydraulic control groundwater monitoring program during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in January 2011 associated with this task was $5,538.75.

If you have any questions regarding this invoice, please do not hesitate to call me at 978-589-3044. It has been a pleasure assisting you with this important project, and I look forward to providing additional services in the future.

Sincerely yours,
AECOM

Justin Mosquera
Project Manager

Attachment

Table 1 Invoice Summary
2010 Phytoremediation Program
January 2011 Billing Period

Task		Authorized Budget	2010 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	$34,200.00	$11,400.00	$27,045.71	$2,090.00	$29,135.71	$5,064.29
0200	Continued Groundwater Suppression Evaluation Activities	$66,600.00	$38,100.00	$59,506.12	$5,538.75	$65,044.87	$1,555.13
Total		**$100,800.00**	**$49,500.00**	**$86,551.83**	**$7,628.75**	**$94,180.58**	**$6,619.42**

2009 Phyto Funding $51,300, 2010 Phyto Funding $49,500.

PO 64025
DC
6/27/11

30.40.00.00.182.29.00

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago, IL 60674

ACH Payment to:
AECOM Inc.
An AECOM Company
Bank of America
Account Number
5800937020
ABA Number 071000039

Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

RECEIVED
JUN 27 2011
By

AECOM
2 Technology Park Drive, Westford, MA 01886
Telephone: 978-589-3000 Fax: 978-589-3100

Federal Tax ID No.
06-0852759

RECEIVED
JUN 2[illegible]
ACCOUNTS PAYABLE

ATTN : MURPHY THOMAS
UNITIL SERVICES CORPORATON
6 LIBERTY LANE W
HAMPTON, NH 03842

Invoice Date: 08-JUN-11
Invoice Number: 37131936

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM
Bill Through Date : 05-FEB-11 to 27-MAY-11

Task Number : 0100
Task Name : INSTALLATION ACTIVIT

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	13-MAY-11	12.00	97.50	1,170.00
Callahan, Colin P	P12	13-MAY-11	15.00	97.50	1,462.50
Callahan, Colin P	P12	20-MAY-11	1.00	97.50	97.50
Mosquera, Justin L	P17	18-FEB-11	1.00	155.00	155.00
Mosquera, Justin L	P17	04-MAR-11	0.50	155.00	77.50
Mosquera, Justin L	P17	06-MAY-11	0.25	155.00	38.75
Mosquera, Justin L	P17	13-MAY-11	5.50	155.00	852.50
Mosquera, Justin L	P17	20-MAY-11	1.25	155.00	193.75
Tammi, Carl E	P20	11-MAR-11	0.50	190.00	95.00
Tammi, Carl E	P20	13-MAY-11	0.50	190.00	95.00
Van Naerssen, Kristoffer J	P14	13-MAY-11	25.00	115.00	2,875.00
Van Naerssen, Kristoffer J	P14	13-MAY-11	2.50	115.00	287.50
Total Labor Bill Rate			**65.00**		**7,400.00**

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Business Meeting	Callahan, Colin P	11-MAY-11	EXP1248196	27.55	1.0000	27.55
Business Meeting	Callahan, Colin P	12-MAY-11	EXP1248196	29.90	1.0000	29.90
Mileage	Van Naerssen, Kristoffer J	11-MAY-11	EXP1243926	78.00	1.0800	84.24
Mileage	Van Naerssen, Kristoffer J	12-MAY-11	EXP1243926	82.00	1.0800	88.56
Miscellaneous - Allowable	Van Naerssen, Kristoffer J	12-MAY-11	EXP1243926	43.48	1.0800	46.96
Supplies	Callahan, Colin P	12-MAY-11	EXP1248196	413.05	1.0000	413.05
Travel All Other	Callahan, Colin P	11-MAY-11	EXP1248196	7.00	1.0800	7.56
Travel All Other	Callahan, Colin P	12-MAY-11	EXP1248196	7.00	1.0800	7.56
Total Reimbursable				**687.98**		**705.38**

Task Total : INSTALLATION ACTIVIT **8,105.38**

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM **8,105.38**

Invoice Summaries

Total Current Amount :	8,105.38
Retention Amount :	0.00
Pre-Tax Amount :	8,105.38
Tax Amount :	0.00
Total Invoice Amount :	**8,105.38**

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	8,105.38	94,180.58	102,285.96		
Billing Total :	8,105.38	94,180.58	102,285.96		

Outstanding Invoices

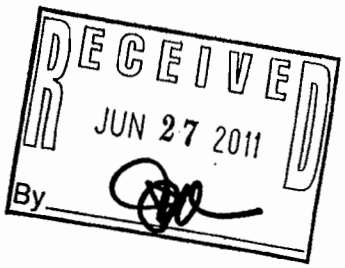
Invoice Number	Invoice Date	Invoice Balance
37131936	08-JUN-11	8,105.38
Outstanding Total :		8,105.38

AECOM
2 Technology Park Drive
Westford, MA 01886

978.589.3000 tel
978.589.3100 fax

June 16, 2011

Mr. Thomas Murphy
Unitil Services Corp.
6 Liberty Lane W
Hampton, NH 03842-1720



AECOM Ref. No.: 60139734-Inv23

RE: Invoice for Activities Related to 2011 Phytoremediation Program
Petrolane/Northern Utilities, Inc. Site (DES #198712002, Project #432)
32 Gonic Road, Rochester, NH
AECOM Project #60139734
Period Ending May 27, 2011

Dear Mr. Murphy:

Enclosed for your information is an invoice and Progress Report for professional environmental consulting services related to the 2011 Phytoremediation Program. Elements of the Phytoremediation Program include continued groundwater suppression installation and evaluation activities at the former manufactured gas plant located at the above referenced property.

Project Budget Information

This invoice is for $8,105. The total authorized budget for this project is $139,700 which includes authorizations for 2009, 2010 and 2011 phytoremediation activities. The proposal for 2011 phytoremediation activities was approved on March 2, 2011 and includes continued groundwater suppression installation and evaluation activities. This project was proposed on a time and materials basis to be billed on a monthly basis.

Work Performed

The following section briefly describes work and charges for this invoicing period for each task:

Task 0100 2011 Continued Groundwater Suppression Installation Activities

AECOM installed the Thermal Dissipation Probes (TDPs) and activated the irrigation system during this invoicing period. Minor repairs were needed to re-activate the irrigation system. As detailed in Table 1 and the attached invoice, the cost incurred in May 2011 associated with this task was $8,105.

If you have any questions regarding this invoice, please do not hesitate to call me at 978-589-3044. It has been a pleasure assisting you with this important project, and I look forward to providing additional services in the future.

Sincerely yours,
AECOM

Justin Mosquera
Project Manager

Attachment

Table 1 Invoice Summary
2010 Phytoremediation Program
May 2011 Billing Period

Task		Authorized Budget	2011 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	$43,700.00	$9,500.00	$29,135.71	$8,105.00	$37,240.71	$6,459.29
0200	Continued Groundwater Suppression Evaluation Activities	$96,000.00	$29,400.00	$65,044.87		$65,044.87	$30,955.13
Total		**$139,700.00**	**$38,900.00**	**$94,180.58**	**$8,105.00**	**$102,285.58**	**$37,414.42**

2009 Phyto Funding $51,300, 2010 Phyto Funding $49,500, 2011 Phyto Funding $38,900.

Confirmation

Expense report number EXP1248196 for 657.01 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP1248196

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

To complete the expense report submission process, you must:
**Send required receipts to Accounts Payable, print & sign this page and attach all required receipts to a 8-1/2x11 sheet paper.
**Both the "Expense Lines" Tab and "Expense Allocations" Tab pages need to be printed.
**Print and sign the iExpense Excel worksheet (if you used the Excel import method).
**Place this page and the original receipts in an interoffice envelope, and send to Accounts Payable along with the transmittal sheet (unless otherwise instructed by your supervisor).

Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

If your manager does not take action within 7 days the expense report will be escalated to his/her manager for approval. To see the status and current approver for your expense report, please revisit the iExpense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	Callahan, Colin P (647972)	Report Submit Date	20-MAY-2011
Expense Dates	04-MAY-2011 - 12-MAY-2011	Attachments	View
Cost Center (DEPT)	5826	Report Total	657.01 USD
Detailed Business Purpose	GW Sampling & TDP Install	Reimbursement Amount	657.01 USD
Approver	Mosquera, Justin L		
Receipts Status	Required		

AECOM US
Signature _____
I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
10-May-2011	18.30 USD	MISC-Miscellaneous	Ice & Drinks						18.30					
10-May-2011	29.69 USD	MISC-Miscellaneous	Lunch for Eddie Z & C Callahan		✔				29.69					
10-May-2011	100.00 USD	MISC-Miscellaneous	Gas		✔				100.00					
10-May-2011	7.00 USD	MISC-Miscellaneous	Tolls						7.00					
11-May-2011	27.55 USD	MISC-Miscellaneous	Lunch for Kris Van Naerssen & C Callahan		✔				27.55					

11-May-2011	7.00 USD	MISC-Miscellaneous	Tolls						7.00							
12-May-2011	387.02 USD	MISC-Miscellaneous	Field Supplies		✔				387.02							
12-May-2011	26.03 USD	MISC-Miscellaneous	Field Supplies		✔				26.03							
12-May-2011	29.90 USD	MISC-Miscellaneous	Lunch for Kris Van Naerssen & C Callahan		✔				29.90							
12-May-2011	7.00 USD	MISC-Miscellaneous	Tolls						7.00							
04-May-2011	17.52 USD	MISC-Miscellaneous	Tecnu						17.52							
								Total	657.01							

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 84937
05/10/2011 17:03:16
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N1 ATTENDANT 78938
05/11/2011 06:47:03
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S6 ATTENDANT 79207
05/10/2011 17:15:25
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79243
05/11/2011 18:21:26
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 86114
05/11/2011 07:00:00
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 86178
05/11/2011 07:11:18
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 80262
05/11/2011 18:32:55
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S3 ATTENDANT 86155
05/11/2011 18:42:56
Class 1 $2.00 US Cash

WILD WILLY'S BURGERS
12 COMIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 000013847581

Sale

VISA xxxxxxxxxxxx7152

Entry Method: Swiped

Total: $ 27.55

05/11/11 13:56:44

Invoice: 000005

Approval Online App Code: 055589

Batch#: 000336

Customer Copy
THANK YOU!
COME AGAIN!

280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00010 12244 05/11/11 11:13 AM
CASHIER PATRICIA - PAM6415

031724987575 HOSE <A>	
4@39.97	159.88
NLP Savings $12.00	
054007108368 35BLUELCTAPE <A>	
4@3.78	15.12
NLP Savings $0.00	
054007108108 35 TAPE <A>	
4@3.78	15.12
NLP Savings $0.00	
742366999832 FOIL TAPE <A>	
2@6.58	13.16
NLP Savings $0.00	
081834002026 SHARPENER <A>	1.99
NLP Savings $0.00	
046878279339 BRSSHOFFCPLG <A>	
4@5.97	23.88
NLP Savings $0.00	
018578000490 QWICK CAP <A>	
4@3.22	12.88
NLP Savings $0.00	
073257011624 20 YARD BAGS <A>	2.98
NLP Savings $0.00	
032076070113 ASST TIE <A>	7.97
NLP Savings $0.00	
051131982147 TAPE <A>	
4@6.97	27.88
NLP Savings $0.00	
025000058011 20 OZ LEMON <A>	
12@1.48	17.76
NLP Savings $0.00	
049000009774 20 OZ. WATER <A>	1.48
NLP Savings $0.00	
764666538337 REBAR TIWIRE <A>	5.57
NLP Savings $0.00	
030699484805 1/8X3RNRDPLN <A>	
6@2.21	13.26
NLP Savings $0.00	
716511516014 STAP TAB INS <A>	15.89
NLP Savings $0.00	
754826044563 2 SCH40 <A>	
12@4.35	52.20
NLP Savings $0.00	
SUBTOTAL	387.02
SALES TAX	0.00
TOTAL	$387.02
XXXXXXXXXXXX7152 VISA	387.02
AUTH CODE 02510B/4104556	TA

BEN FRANKLIN CRAFTS
60 WAKEFIELD STREET
ROCHESTER, NH 03867
(603) 332-2227
www.benfranklincraftsnh.com
PLEASE CALL AGAIN
THANK YOU

05-11-2011 WED #38

RH Super Saver	3.39
SUBTL	3.39
VOID	
YARNCROCH CO	-3.39
SUBTL	0.00
4× 3.798	
FINEART SUPP	15.16
2× 3.798	
HARD CRAFTS	7.58
Modeling Clay	3.29
SUBTL	26.03
Chg	26.03

ITEM 7
Claire 5/24 12:07TH

WILD WILLY'S BURGERS
12 COMIC ROAD
ROCHESTER NH 03867
603-332-1153

Merchant ID: 660005130471601

Sale

[redacted]7152
VISA Entry Method: Swiped
Total: $ 29.90
05/12/11 12:26:49
Invl: 000011 Appr Code: 025618
Apprvd: Online Batch#: 000337

Customer Copy
THANK YOU!
COME AGAIN!

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N2 ATTENDANT 69373
05/12/2011 06:42:40
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S2 ATTENDANT 76937
05/12/2011 17:01:30
Class 1 $2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 86178
05/12/2011 07:07:13
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 86114
05/12/2011 06:55:25
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79243
05/12/2011 16:37:08
Class 1 $0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 84946
05/12/2011 16:48:53
Class 1 $0.75 US Cash

CVS/pharmacy
786 ASHLEY BOULEVARD NEW BEDFORD, MA
PHARMACY: 998-3943 STORE: 998-3635
REG#04 TRN#8721 CSHR#02832/6 STR#799

1 TECNU OAK/IVY 42 16.49T
SUBTOTAL 16.49
MA 6.25% TAX 1.03
TOTAL 17.52
VISA 17.52
**********7152 MS
CHANGE .00

2500 7991 1248 7210 48
RETURNS WITH RECEIPT THRU 07/03/2011
MAY 4, 2011 1:40 PM
GET YOUR CVS EXTRACARE CARD
THANK YOU. SHOP 24 HOURS AT CVS.COM

Confirmation

Expense report number EXP1243926 was previously submitted for approval.

Expense Report EXP1243926

TIP Hint: Print in landscape format to include all displayed information. Use your browser Back button to exit the printable page view.

Submission Instructions

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General Information

Name	Van Naerssen, Kristoffer J (649906)	Report Submit Date	17-MAY-2011
Expense Dates	19-APR-2011 - 12-MAY-2011	Attachments	None
Cost Center (DEPT)	5826	Report Total	318.48 USD
Detailed Business Purpose	April / May Visits	Reimbursement Amount	318.48 USD
Approver	Mosquera, Justin L		
Receipts Status	Required		

MarkView Attachments

MarkView	Type	Description	Category	Last Updated By	Last Updated	Delete
No results found.						

AECOM US
Signature
I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
19-Apr-2011	10.00 USD	TRA-Mileage	Site Visit - Malden River						10.00					
25-Apr-2011	75.00 USD	TRA-Mileage	Site Visit - Pipersville						75.00					
28-Apr-2011	10.00 USD	TRA-Mileage	Site Visit - Malden River						10.00					
29-Apr-2011	10.00 USD	TRA-Mileage	Site Visit - Malden River						10.00					

09-May-2011	10.00 USD	TRA-Mileage	Site Visit - Malden River				10.00
11-May-2011	78.00 USD	TRA-Mileage	Site Visit - Rochester				78.00
12-May-2011	82.00 USD	TRA-Mileage	Site Visit - Rochester				82.00
12-May-2011	25.88 USD	MISC-Miscellaneous	Site Visit - Rochester				25.88
12-May-2011	1.62 USD	MISC-Miscellaneous	Site Visit - Rochester				1.62
12-May-2011	15.98 USD	MISC-Miscellaneous	Site Visit - Rochester				15.98
						Total	318.48

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Confirmation

Expense report number EXP1243926 was previously submitted for approval.

Expense Report EXP1243926

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General Information

Name	Van Naerssen, Kristoffer J (549908)	Report Submit Date	17-MAY-2011
Expense Dates	19-APR-2011 - 12-MAY-2011	Attachments	None
Cost Center (DEPT)	5826	Report Total	318.48 USD
Detailed Business Purpose	April / May Visits	Reimbursement Amount	318.48 USD
Approver	Mosquera, Justin L		
Receipts Status	Required		

MarkView Attachments

MarkView	Type	Description	Category	Last Updated By	Last Updated	Delete
No results found.						

AECOM US
Signature
I certify the claimed business expenses contained herein are bona fide and proper business expenses incurred on behalf of AECOM, and are in accordance with AECOM travel & expense policies.

Expense Lines | Expense Allocations | Weekly Summary | Approval Notes [0]

Project Allocations

Expand All | Collapse All

Focus	Line	Payment Method	Date	Expense Type	Receipt Amount	Reimbursable Amount (USD)	Merchant Location	Justification	Project	Task	Project Expenditure Organization
	All					318.48					
	1	Cash Receipt	19-Apr-2011	TRA-Mileage	10.00 USD	10.00		Site Visit - Malden River	60142703 Duct Bank Replacement NG	1 Task 1	41.ACM.USWES1.5826
	2	Cash Receipt	25-Apr-2011	TRA-Mileage	75.00 USD	75.00		Site Visit - Pipersville	60196776 GE HUDSON RIVER 2011	300.E BAY Environment	41.ACM.USWES1.5826
	3	Cash Receipt	28-Apr-2011	TRA-Mileage	10.00 USD	10.00		Site Visit - Malden River	60142703 Duct Bank Replacement NG	1 Task 1	41.ACM.USWES1.5826

4	Cash Receipt	29-Apr-2011	TRA-Mileage	10.00 USD	10.00	Site Visit - Malden River	60142703 Duct Bank Replacement NG	1 Task 1	41.ACM.USWES1.5826
5	Cash Receipt	09-May-2011	TRA-Mileage	10.00 USD	10.00	Site Visit - Malden River	60142703 Duct Bank Replacement NG	1 Task 1	41.ACM.USWES1.5826
6	Cash Receipt	11-May-2011	TRA-Mileage	78.00 USD	78.00	Site Visit - Rochester	60139734 13046004 2010 PHYTOREMEDIATION	0100 INSTALLATION ACTIVIT	41.ACM.USWES1.5826
7	Cash Receipt	12-May-2011	TRA-Mileage	82.00 USD	82.00	Site Visit - Rochester	60139734 13046004 2010 PHYTOREMEDIATION	0100 INSTALLATION ACTIVIT	41.ACM.USWES1.5826
8	Cash Receipt	12-May-2011	MISC-Miscellaneous	25.88 USD	25.88	Site Visit - Rochester	60139734 13046004 2010 PHYTOREMEDIATION	0100 INSTALLATION ACTIVIT	41.ACM.USWES1.5826
9	Cash Receipt	12-May-2011	MISC-Miscellaneous	1.62 USD	1.62	Site Visit - Rochester	60139734 13046004 2010 PHYTOREMEDIATION	0100 INSTALLATION ACTIVIT	41.ACM.USWES1.5826
10	Cash Receipt	12-May-2011	MISC-Miscellaneous	15.98 USD	15.98	Site Visit - Rochester	60139734 13046004 2010 PHYTOREMEDIATION	0100 INSTALLATION ACTIVIT	41.ACM.USWES1.5826

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

5/12/11

Walmart
Save money. Live better.

Walmart
MANAGER JAMES RUSSO
(603) 430 - 9985
NEWINGTON, NH

STR 2398 OPN 00003300 TER 12 TRN 07665		
MULTI METER	084217303320	25.80 N
PENN PUMP	007734110052	7.97 N
5G GAS CAN	084454980033	9.88 N
	SUBTOTAL	43.73
	TOTAL	43.73
	DEBIT TEND	43.73
	CHANGE DUE	0.00

EFT DEBIT PAY FROM PRIMARY
ACCOUNT : 8889
43.73 TOTAL PURCHASE
REF # 113208415824
NETWORK ID: 0069 APPR CODE 220814
05/12/11 17:25:20

ITEMS SOLD 3

TC# 9211 4505 4947 4089 2200

Low prices.Every day. On everything.
Backed by our Ad Match Guarantee.
05/12/11 17:25:22

43.73

Walmart
Save money. Live better.

Walmart
MANAGER JAMES RUSSO
(603) 430 - 9985
NEWINGTON, NH

STR 2398 OPN 00003354 TER 93 TRN 07447		
308 RUF VINO 007005254013		1.62 N
	SUBTOTAL	1.62
	TOTAL	1.62
	CASH TEND	10.00
	CHANGE DUE	8.38

ITEMS SOLD 1

TC# 0757 9606 9031 9732 8798

THE HOME DEPOT More saving. More doing.

280 N MAIN STREET
ROCHESTER, NH 03867 (603)335-1300

3489 00057 11767 05/12/11 09:10 AM
CASHIER SELF CHECK OUT - SCOT57

032076070175 48 GREY TIE <A>
2@7.99 15.98

SUBTOTAL	15.98
SALES TAX	0.00
TOTAL	$15.98
XXXXXXXXXXXX8889 DEBIT	55.98
AUTH CODE 461692	
CHANGE DUE	40.00

3489 57 11767 05/12/2011 3263

RETURN POLICY DEFINITIONS

POLICY ID	DAYS	POLICY EXPIRES ON
A 1	90	08/10/2011

THE HOME DEPOT RESERVES THE RIGHT TO LIMIT / DENY RETURNS. PLEASE SEE THE RETURN POLICY SIGN IN STORES FOR DETAILS.

GUARANTEED LOW PRICES
LOOK FOR HUNDREDS OF
LOWER PRICES STOREWIDE

[redacted]

✂ Detach and return the above portion with your payment ✂

City of Rochester
Rochester, New Hampshire

WATER & SEWER BILL

Customer Copy
Keep this portion for your records

Customer	Service Address
NORTHERN UTILITIES INC	32 GONIC RD /

Bill Number	Account Number	Past Due Date	Bill Date
13780455	152340	02/24/2011	01/25/2011

Description	Read Date Current	Read Date Previous	Meter Readings Current	Meter Readings Previous	Usage in 100 cu. feet	Charge
TURN OFF	OK JHF blanket		RECEIVED FEB - 8 2011 ACCOUNTING			30.00

Last Payment Amt	Last Payment Date	Past Due	Other Current Charges	Current Charges	Amount Due
94.41	11/15/2010	0.00	.00	30.00	**$30.00**

WATER $4.29, ELDERLY $1.85, MINIMUM $16.31, MINIMUM ELDERLY $13.06
SEWER $5.95, ELDERLY $3.95, MINIMUM $28.44, MINIMUM ELDERLY $22.64

WWW.ROCHESTERNH.NET

BILL IS DUE UPON PRESENTATION

Payment is due upon receipt. Interest accrues daily from the past due date at the rate of 12% interest per annum computed to the payment date. Past due bills shall cause water shut off and may become a lien on the property.

100 CU. FT. = 748 Gallons
Rate per 100 cubic feet.

Remit payment to:
City of Rochester
Tax Collector's Office
P.O. Box 981096
Boston MA 02298-1096

For all other correspondence or accounting inquiries:
City of Rochester
Water & Sewer Billing Office
19 Wakefield Street
Rochester, NH 03867

Phone: 1 (603) 332 - 3110 Billing Office
1 (603) 330 - 7127 Off Hour Emergencies

Consumption billed in hundreds of cubic feet. Non-receipt of issued bill not deemed excuse for failure to pay. Property owner responsible for protection of meter from loss and damage. Any person other than an employee of the Rochester Water Department who turns water off or on at curb stop, without permission, may be subject to a fine.

INTENTIONALLY LEFT BLANK

INTENTIONALLY LEFT BLANK

INTENTIONALLY LEFT BLANK