

Attachment A
Insurance Recovery Allocation

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

Attachment A
Page 1 of 2

ERC Recovery Allocation

	Allocation %	Recovery Amount	% of Recovery Total	Resolution Fee	% of Resolution Fee
Recovery Total		\$ -			
Dispute Resolution Fee				\$0.00	0.0%
<u>Massachusetts</u>					
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%
<u>New Hampshire</u>					
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%
<u>Maine</u>					
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%
<u>Massachusetts</u>					
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%
<u>New Hampshire</u>					
MGP Sites	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%
<u>Maine</u>					
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
2011-2012 ENVIRONMENTAL RESPONSE COSTS

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

Attachment 3A

Exeter Invoices

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



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: 17-JUN-11
Invoice Number: 37135338

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 : 30-APR-11 to 27-MAY-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0100

Task Name : SEDIMENT INVESTIGATI

Labor Bill Rate			Hours	Bill Rate	Billed Amt
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>			
Hartman, Kaitlin N	P12	06-MAY-11	3.50	97.50	341.25
Hartman, Kaitlin N	P12	13-MAY-11	2.50	97.50	243.75
Total Labor Bill Rate			6.00		585.00
Task Total : SEDIMENT INVESTIGATI					585.00

Task Number : 0450

Task Name : RAP PREP

Labor Bill Rate						
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>	
McCarthy, Ryan S	P16	06-MAY-11	4.50	135.00	607.50	
McCarthy, Ryan S	P16	13-MAY-11	3.50	135.00	472.50	
Total Labor Bill Rate			8.00		1,080.00	
Reimbursable						
<u>Expenditure Type</u>	<u>Employee/Vendor Name</u>	<u>Date</u>	<u>Inv Number</u>	<u>Raw Cost</u>	<u>Multiplier</u>	<u>Billed Amt</u>
Lunch	McCarthy, Ryan S	21-APR-11	EXP1224407	20.71	1.0800	22.37
Lunch	McCarthy, Ryan S	02-MAY-11	EXP1224407	20.11	1.0800	21.72
Supplies	McCarthy, Ryan S	02-MAY-11	EXP1224407	210.00	1.0800	226.80
Supplies	McCarthy, Ryan S	03-MAY-11	EXP1224407	396.24	1.0800	427.94
Total Reimbursable			647.06			698.83
Task Total : RAP PREP						1,778.83

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate			Hours	Bill Rate	Billed Amt
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>			
Rodriguez, Deanna L	P13	13-MAY-11	0.75	105.00	78.75

Rodriguez, Deanna L	P13	27-MAY-11	0.25	105.00	28.25
Total Labor Bill Rate			<u>1.00</u>		<u>105.00</u>
Task Total : MEETINGS & PROJ.MGMT					<u>105.00</u>

Lump Sum		
<u>Description</u>		<u>Billed Amt</u>
Computer/Telecomm/Copier @ 6% Labor per Contract		106.20
Total Lump Sum		<u>106.20</u>
Project Total : 13045001 EXETER SEDIMENT INVESTIGATION		<u>2,575.03</u>

Invoice Summaries		
Total Current Amount :		2,575.03
Retention Amount :		0.00
Pre-Tax Amount :		2,575.03
Tax Amount :		0.00
Total Invoice Amount :		<u>2,575.03</u>

Handwritten notes: 31-100-00-00-182-29-00, NO-M, 7/5/11, OFC

Billing Summaries					
<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	2,575.03	207,499.86	210,074.89		
Billing Total :	<u>2,575.03</u>	<u>207,499.86</u>	<u>210,074.89</u>		

Outstanding Invoices		
<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37089525	08-FEB-11	2,553.28
Outstanding Total :		<u>2,553.28</u>

Confirmation

Expense report number EXP1224407 for \$111.31 has been submitted to Hampton, Caroline P for approval.

Expense Report EXP1224407

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: McCarthy, Ryan S (\$48137)
Expense Dates: 21-APR-2011 - 03-MAY-2011
Cost Center (DEPT): 5827
Detailed Business Purpose: Project Expenses
Approver: Hampton, Caroline P
Receipts Status: Required

Report Submit Date: 03-MAY-2011
Attachments: View
Report Total: \$111.31 USD
Reimbursement Amount: \$111.31 USD

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
21-Apr-2011	75.00	MISC-USD	Miscellaneous	employee recognition	✓				75.00					
21-Apr-2011	20.71	USD	TRA-Lunch	project expenses					20.71					
21-Apr-2011	206.94	MISC-USD	Miscellaneous	project expenses	✓				206.94					
22-Apr-2011	109.30	MISC-USD	Miscellaneous	project expenses	✓				109.30					
02-May-2011	20.11	USD	TRA-Lunch	project expenses					20.11					
02-May-2011	210.00	MISC-		project	✓				210.00					

		USD Miscellaneous expenses			
03-May-2011	89.25	MISC- project			89.25
		USD Miscellaneous expenses			
			Total		89.25

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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THANK YOU FOR SHOPPING AT
ARJAY ACE HARDWARE
55 LINCOLN STREET
EXETER, N.H. 03833-3213
(603) 772-8054

BOING !! SPRING HAS FINALLY SPRUNG !!
4/21/11 10:07AM CP 554 SALE

3001815	1	EA	12.49	EA	N
TIES CABLE10-3/4BLK100PK			12.49		
5	55	EA	4.99	EA	N
CHAIN			274.45		

SUB-TOTAL: 286.94 TAX:
DISCOUNT: TOTAL: 286.94
BC AMT: \$286.94

BNK ID: XXXXXXXXXX1002
ID: 37821017488380882
AUTH: 582819 AMT: 286.94
Host reference #:871196 Bat#000010
SWIPED
CARD TYPE:AN EXPRESS EXPR: XXXX



== 871196 <==
CLST # *2888
ACE REWARDS ID # 19773890129

THANK YOU RYAN S MCCARTHY
FOR YOUR PATRONAGE

[Handwritten Signature]

Name: X
Acct: RYAN MCCARTHY

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

We now rent carpet extractors for your
convenience. Our machines are
maintained to the highest standards and
work better than other machines. Give
them a try!!

Las Olas Tequeria

Amount: 20.71

DATE: 04/21/2011 TIME: 1:25:31 PM
CASHIER ID: 115

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

ETH:SWIPED TYPE:CREDIT ACTN:SALE
AMT:20.71 NAME:MCCARTHY/RYAN CARD:8588
ISSU:VISA APRV:086118 AUTH:325788884
RREF:<325788884/> 111139613121 CVVM:NO
MATCH ZIPM:NO MATCH

signature



CUSTOMER COPY



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

000056

PAGE 1 OF 1

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

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P
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MCCARTHY, RYAN
15 WESTSIDE DR
EXETER NH 03833-4215

Order No.	P.O. No.	Sold To No.	Invoice No.	Invoice Date	Due Date
SC08221450	MCCARTHY04222011	6202826 - 1	1017232936	04/22/2011	04/22/2011

Buyer	Carrier	Freight Terms	Ship Date	Payment Terms
	UPSGND	LOCKED	04/22/2011	PDYCC

LINE	PRODUCT NO.	DESCRIPTION	QTY. B.O.	QTY. SHIP	U.O.M.	UNIT AMOUNT	AMOUNT
1	113145	TRKE ANCHOR 15 IN CRTL	0	1	PK	64.10	64.10
2	156208	GEMPLER'S CENTER PULL WIPER	0	1	EX	20.95	20.95
3	156551L	GLV KEVLAR ATLAS LRG	0	1	PR	11.40	11.40

Thank you for your order.

SUBTOTAL: 96.45
FREIGHT: 12.85
TAXES: 0.00

PN9517937877

ML

CHARGED TO *****1002

109.30

PAYMENT TERMS: PDYCC

PAID WITH CREDIT CARD - BALANCE DUE

0.00

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

B
I
L
L
T
O

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

REMIT
TO:

GEMPLER'S
Account #: 6202826
PO BOX 5176
JAMESVILLE WI 53547-5176

Order No.	Invoice No.	Bill To No.	Amount Due
SC08221450	1017232936	6202826 - 1	0.00 USD

Las Olas Taqueria

Amount: 20.11

DATE: 05/02/2011 TIME: 11:05:22 AM
CASHIER ID: 160

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

AMT: 20.11 TYPE: CREDIT ACTN: SALE
NAME: MCCARTHY/RYAN CARD: 8599
AUTH: 330441546
CASH REF: 330441546 11223107824 CVM: NO
MATCH ZIP: NO MATCH

CUSTOMER COPY

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

BOING !! SPRING HAS FINALLY SPRUNG !!
5/02/11 10:16AM KG 557 SALE

5 60 EA 3.50 EA N
CHAIN 210.00

SUB-TOTAL: 210.00 TAX:
DISCOUNT: TOTAL: 210.00
BC AMT: \$210.00

BN CARD: XXXXXXXXXXXX1002
ID: 376210174995690982
AUTH: 525152 AMT: 210.00
Host reference #: 676393 Bat#000020,
SWIPE
CARD TYPE: AM EXPRESS EXPR: XXXX



JRN LING 76393
CUST # *2898
ACE REWARDS ID # 19773690129

THANK YOU RYAN S MCCARTHY
FOR YOUR PATRONAGE

Name: X
Auth: RYAN MCCARTHY

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

We now rent carpet extractors for your
convenience. Our machines are
maintained to the highest standards and
work better than other machines. Give
a try!!

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: 15-JUL-11
Invoice Number: 37143411

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 : 28-MAY-11 to 01-JUL-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0400

Task Name : REPORTING

Labor Bill Rate					
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>
Warren, Laura A	P16	17-JUN-11	2.00	135.00	270.00
Total Labor Bill Rate			2.00		270.00
Task Total : REPORTING					270.00

Task Number : 0450

Task Name : RAP PREP

Labor Bill Rate					
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>
McCarthy, Ryan S	P16	24-JUN-11	0.50	135.00	67.50
Total Labor Bill Rate			0.50		67.50
Reimbursable					
<u>Expenditure Type</u>	<u>Employee/Vendor Name</u>	<u>Date</u>	<u>Inv Number</u>	<u>Raw Cost</u>	<u>Billed Amt</u>
Dinner	McCarthy, Ryan S	12-MAY-11	EXP1259642	35.75	38.61
Total Reimbursable				35.75	38.61
Task Total : RAP PREP					106.11

OCT 27 2011

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate					
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>
McCabe, Mark M	P20	17-JUN-11	2.00	190.00	380.00
McCabe, Mark M	P20	24-JUN-11	6.00	190.00	1,140.00
McCabe, Mark M	P20	01-JUL-11	2.00	190.00	380.00
Rodriguez, Deanna L	P13	03-JUN-11	0.75	105.00	78.75
Rodriguez, Deanna L	P13	10-JUN-11	0.25	105.00	26.25
Rodriguez, Deanna L	P13	24-JUN-11	0.25	105.00	26.25
Total Labor Bill Rate			11.25		2,031.25
Task Total : MEETINGS & PROJ.MGMT					2,031.25

Reg 84721

Lump Sum

Description

Computer/Telecomm/Copier @ 6% Labor per Contract

Billed Amt
142.13

Total Lump Sum

142.13

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION

2,549.49

Invoice Summaries

Total Current Amount :

2,549.49

Retention Amount :

0.00

Pre-Tax Amount :

2,549.49

Tax Amount :

0.00

Total Invoice Amount :

2,549.49

Billing Summaries

Billing Summary

Billings

Current
2,549.49

Prior
210,074.89

Total
212,624.38

Limit

Remain

Billing Total :

2,549.49

210,074.89

212,624.38

OK R
10/10/11
NO-PA

30-40-00 - 00 782-29-00

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



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: 05-AUG-11
Invoice Number: 37150592

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 : 02-JUL-11 to 29-JUL-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	15-JUL-11	0.50	135.00	67.50
Total Labor Bill Rate			0.50		67.50
Task Total : RAP PREP					67.50

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	15-JUL-11	4.00	190.00	760.00
McCabe, Mark M	P20	22-JUL-11	4.00	190.00	760.00
McCabe, Mark M	P20	29-JUL-11	4.00	190.00	760.00
Rodriguez, Deanna L	P13	15-JUL-11	0.75	105.00	78.75
Total Labor Bill Rate			12.75		2,358.75
Task Total : MEETINGS & PROJ.MGMT					2,358.75

Lump Sum		
Description		Billed Amt
Computer/Telecomm/Copier @ 6% Labor per Contract		145.58
Total Lump Sum		145.58
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION		2,571.83

Invoice Summaries	
Total Current Amount :	2,571.83
Retention Amount :	0.00
Pre-Tax Amount :	2,571.83
Tax Amount :	0.00
Total Invoice Amount :	2,571.83

30-40-00-00-182-29-00
OK
8/12/11
NO-NY

Billing Summaries					
<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	2,571.83	212,624.38	215,196.21		
Billing Total :	<u>2,571.83</u>	<u>212,624.38</u>	<u>215,196.21</u>		

Outstanding Invoices		
<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37143411	15-JUL-11	2,549.49
37150592	05-AUG-11	2,571.83
Outstanding Total :		<u>5,121.32</u>

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



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: 06-SEP-11
Invoice Number: 37161140

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 : 30-JUL-11 to 26-AUG-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0400

Task Name : REPORTING

Labor Bill Rate	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Employee Name/Title					
Herberich, Lori A	P16	12-AUG-11	0.50	135.00	67.50
			0.50		67.50
Total Labor Bill Rate					67.50
Task Total : REPORTING					67.50

Task Number : 0450

Task Name : RAP PREP

Labor Bill Rate	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Employee Name/Title					
McCarthy, Ryan S	P16	26-AUG-11	1.00	135.00	135.00
			1.00		135.00
Total Labor Bill Rate					135.00
Task Total : RAP PREP					135.00

Task Number : 0000

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Employee Name/Title					
McCabe, Mark M	P20	19-AUG-11	1.00	190.00	190.00
McCabe, Mark M	P20	26-AUG-11	1.00	190.00	190.00
Rodriguez, Deanna L	P13	05-AUG-11	0.50	105.00	52.50
Rodriguez, Deanna L	P13	12-AUG-11	0.25	105.00	26.25
Rodriguez, Deanna L	P13	19-AUG-11	0.50	105.00	52.50
			3.25		511.25
Total Labor Bill Rate					511.25
Task Total : MEETINGS & PROJ.MGMT					511.25

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

Billed Amt
42.83
42.83

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION

756.58

Invoice Summaries

Total Current Amount :	756.58
Retention Amount :	0.00
Pre-Tax Amount :	756.58
Tax Amount :	0.00

Total Invoice Amount :

756.58

Billing Summaries

<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	756.58	215,196.21	215,952.79		
Billing Total :	756.58	215,196.21	215,952.79		

Outstanding Invoices

<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37143411	15-JUL-11	2,549.49
37150592	05-AUG-11	2,571.83
37161140	06-SEP-11	756.58

Outstanding Total :

5,877.90

OK 8U
9/16/11
NU-NH
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

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: 29-SEP-11
Invoice Number: 37168495

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 : 27-AUG-11 to 23-SEP-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0450

Task Name : RAP PREP

Labor Bill Rate		Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Employee Name/Title						
McCarthy, Ryan S		P16	02-SEP-11	0.50	135.00	67.50
McCarthy, Ryan S		P16	09-SEP-11	1.00	135.00	135.00
Total Labor Bill Rate				1.50		202.50
Task Total : RAP PREP						202.50

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate		Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Employee Name/Title						
Harrison, Theresa A (Terri)		P11	09-SEP-11	0.25	92.50	23.13
Harrison, Theresa A (Terri)		P11	16-SEP-11	0.25	92.50	23.13
McCabe, Mark M		P20	02-SEP-11	2.00	190.00	380.00
McCabe, Mark M		P20	09-SEP-11	2.00	190.00	380.00
McCabe, Mark M		P20	16-SEP-11	4.00	190.00	760.00
McCabe, Mark M		P20	23-SEP-11	1.00	190.00	190.00
Rodriguez, Deanna L		P13	02-SEP-11	0.50	105.00	52.50
Rodriguez, Deanna L		P13	09-SEP-11	0.25	105.00	26.25
Rodriguez, Deanna L		P13	16-SEP-11	0.25	105.00	26.25
Total Labor Bill Rate				10.50		1,861.26
Task Total : MEETINGS & PROJ.MGMT						1,861.26

Lump Sum		Billed Amt
Description		
Computer/Telecomm/Copier @ 6% Labor per Contract		123.83
Total Lump Sum		123.83
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION		2,187.59

Reg 84338

Invoice Summaries

Total Current Amount : 2,187.59
Retention Amount : 0.00
Pre-Tax Amount : 2,187.59
Tax Amount : 0.00
Total Invoice Amount : 2,187.59

Handwritten notes:
over 85
10/31/11
NU-RUP
30-40-00-00-182-29-00

Billing Summaries

<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	2,187.59	215,952.79	218,140.38		
Billing Total :	2,187.59	215,952.79	218,140.38		

Outstanding Invoices

<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37143411	15-JUL-11	2,549.49
Outstanding Total :		2,549.49

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 028009593
SWIFT CODE BOFAUS3N

AECOM

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

Federal Tax ID No.
08-0852759

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

Invoice Date: 29-NOV-11
Invoice Number: 37186587

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-OCT-11 to 25-NOV-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0700

Task Name : ON SITE REPRESENT.

Labor Bill Rate						
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>	
McCabe, Mark M	P20	04-NOV-11	6.00	190.00	1,140.00	
McCabe, Mark M	P20	11-NOV-11	2.00	190.00	380.00	
McCabe, Mark M	P20	18-NOV-11	2.00	190.00	380.00	
McCarthy, Ryan S	P16	04-NOV-11	2.00	135.00	270.00	
Total Labor Bill Rate			12.00		2,170.00	
Reimbursable						
<u>Expenditure Type</u>	<u>Employee/Vendor Name</u>	<u>Date</u>	<u>Inv Number</u>	<u>Raw Cost</u>	<u>Multiplier</u>	<u>Billed Amt</u>
Miscellaneous - Allowable	McCabe, Mark M	12-OCT-11	EXP1462817	310.00	1.0800	334.80
Miscellaneous - Allowable	McCabe, Mark M	14-OCT-11	EXP1462817	285.00	1.0800	307.80
Total Reimbursable				595.00		642.60
Task Total : ON SITE REPRESENT.						2,812.60

Task Number : 0750

Task Name : MGP RESID. MGMT.

Labor Bill Rate						
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>	
McCarthy, Ryan S	P16	25-NOV-11	1.00	135.00	135.00	
Total Labor Bill Rate			1.00		135.00	
SubConsultant						
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Inv Number</u>	<u>Raw Cost</u>	<u>Multiplier</u>	<u>Billed Amt</u>
Outside Services - Allow	ENPRO SERVICES INC	07-NOV-11	1034111	3,414.06	1.0800	3,687.18
Outside Services - Allow	ENPRO SERVICES INC	14-NOV-11	1102111	678.90	1.0800	733.21
Total SubConsultant				4,092.96		4,420.39
Task Total : MGP RESID. MGMT.						4,555.39

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate					
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>
Rodriguez, Deanna L	P13	04-NOV-11	0.50	105.00	52.50
Rodriguez, Deanna L	P13	11-NOV-11	0.25	105.00	26.25
Total Labor Bill Rate			0.75		78.75
Task Total : MEETINGS & PROJ.MGMT					78.75

Lump Sum	<u>Billed Amt</u>
<u>Description</u>	
Computer/Telecomm/Copier @ 6% Labor per Contract	143.03
Total Lump Sum	143.03
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION	7,589.77

Invoice Summaries	
Total Current Amount :	7,589.77
Retention Amount :	0.00
Pre-Tax Amount :	7,589.77
Tax Amount :	0.00
Total Invoice Amount :	7,589.77

OK R/
12/21/09
NU-NH

30-40-00-00-182.29
00

Expense Report EXP1462817

Page 1 of 1

Confirmation

Expense report number EXP1462817 for \$595.00 has been submitted to Kaimar, Laura A for approval.

Expense Report EXP1462817

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 Expense Excel worksheet (if you used the Excel report 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 Expense homepage and view the information under the "Track Submitted Expense Reports" region.

General Information

Name	McCabe, Mark M (648578)	Report Submit Date	27-OCT-2011
Expense Dates	12-OCT-2011 - 14-OCT-2011	Attachments	View
Cost Center (DEPT)	5607	Report Total	\$38.00 USD
Detailed Business Purpose	Site Activity	Reimbursement Amount	\$38.00 USD
Approver	Kaimar, Laura A		
Receipt 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

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Expense Amount	Type	Justification Name	Merchant	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Organization	Business Purpose
12-Oct-2011	310.00	Travel All	Site Activity		✓		+	MC	310.00				
	USD	Other											
14-Oct-2011	285.00	Travel All	Site Activity		✓		+	MC	285.00				
	USD	Other											
Total									595.00				

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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8890

Bodwell's Septic Service, LLC
96 North Road
East Kingston, NH 03827

CUSTOMER'S ORDER NO.	DEPT.	DATE 10/12/11
NAME AECOM		
ADDRESS 250 Apollo Drive Chelmsford MA 01824		

QUAN.	DESCRIPTION	PRICE	AMOUNT
2250	1 Pump Water from on site		
	2 storage tank, dispose at		
	3 Town Waste Water plant		
	4		
	5		
	6		
	7 Job Location		
	8 277 Water Street		
	9 Exeter N.H.		
	10		
	11		
	12		
	13		
	14		
	15		
	16		
	17		
	18	310	-

REC'D BY
SL350

KEEP THIS SLIP
FOR REFERENCE

8891

Bodwell's Septic Service, LLC
96 North Road
East Kingston, NH 03827

CUSTOMER'S ORDER NO.	DEPT.	DATE 10/14/11
NAME AECOM		
ADDRESS 250 Apollo Dr Chelmsford MA 01824		

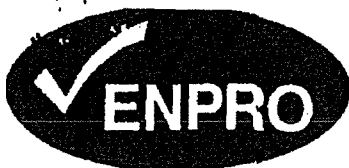
QUAN.	DESCRIPTION	PRICE	AMOUNT
50	1 Pump Water from		
	2 Storage tank dispose at		
	3 Town Waste Water plant		
	4		
	5		
	6 Job Location		
	7 277 Water St		
	8 Exeter NH		
	9		
	10		
	11		
	12		
	13		
	14		
	15		
	16		
	17		
	18	285	-

REC'D BY
D

KEEP THIS SLIP
FOR REFERENCE

Exeter 60139731.0700

Exata-101211, P44



ENPRO Services, Inc.

12 Mulliken Way, Newburyport, Massachusetts 01950
TEL. (978) 465-1595 FAX. (978) 465-2050

AECOM #: 41001

Project #: 6013 9731

Task #: 0750

Expenditure Type: Contractor

PO # (if applicable): 32718ACM

PO Line # (if applicable):

Amount: \$ 3414.06

Date Approved: 11/14/11

Approval Signature: [Signature]

Approver's Employee #: 648678

Approver's Phone #: 978.906.2311

10341-11

November 7, 2011

6324-11

32718ACM

Mark McCabe
Senior Project Manager

Aecom
250 Appollo Drive
Chelmsford, MA 01824

TERMS: Payment due upon receipt. An in Pay When Paid: Yes ☒ No ☐ Late fee will be charged on all invoices over 30 days.
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.

DESCRIPTION						AMOUNT
Project Location: Exeter Housing Authority 277 Water Street Exeter, NH 03833-1859						
Services Provided: October 2011 In accordance with ENPRO's signed Tabulation of Estimated Cost Range dated July 14, 2011, provided rental of roll-off containers and frac tanks for water storage at above referenced project site. Provided transportation of water waste, to an approved receiving facility, as per attached shipping document(s).						
Wednesday, October 12, 2011						
Task A1: Mobilization and set up of lined roll-off container						
RENTAL						
Mobilization of Roll Off Container	10/12-10/31/11	1.00	Event	@	400.00	\$400.00
Roll Off Container		19.00	Day	@	20.00	\$380.00
MATERIALS						
Roll Off Liner		1.00	Liner	@	45.00	\$45.00
Task A2: Mobilization and set up of 4,000g Poly Tank						
RENTAL						
Mobilization of 4000g Poly Tank	10/12	1.00	Event	@	600.00	\$600.00
4000g Poly Above Ground Storage Tank	10/12-10/14	2.00	Day	@	45.00	\$90.00
APPROVED BY: ENPRO Appreciates Your Business						
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.						
TOTAL						Continued

ENPRO Services, Inc.

12 Mulliken Way, Newburyport, Massachusetts 01950

TEL. (978) 465-1595 FAX. (978) 465-2050

www.enpro.com

INVOICE 10341-11

DATE: November 7, 2011

JOB NO. 6324-11

**PURCHASE
ORDER NO. 32718ACM**

CONTACT Mark McCabe
Senior Project Manager

Aecom
250 Appollo Drive
Chelmsford, MA 01824

TERMS: Payment due upon receipt. An interest charge of 1 1/2% per month (18% per annum) will be charged on all invoices over 30 days. 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.

DESCRIPTION							AMOUNT
Continued Pg 2							
Task C1:Cleaning and Demob of AST's							
LABOR							
T. Murphy	Foreman	6.00	Hour	@	60.00	\$360.00	
S. Giles	Field Technician	6.00	Hour	@	50.00	\$300.00	
EQUIPMENT							
Utility Truck c/w Small Hand and Power Tools		1.00	Day	@	200.00	\$200.00	
Pressure Washer		1.00	Day	@	150.00	\$150.00	
RENTAL							
Demobilization of 4000g Poly Tank		10/14	1.00	Event	@	600.00	\$600.00

ENPRO**ENPRO Services, Inc.**

AECOM #: 41001

Assets 0195012 MULLIKEN WAY
S-2050

Project #: 6013 9731

Task # 0250

Expenditure Type: Contractor

PO # (if applicable): 32718ACM

PO Line # (if applicable):

Amount: \$678.90

Date Approved: 11/16/11

Approval Signature: [Signature]

Approver's Employee #: 648678

Approver's Phone #: 978.905.2311

Pay When Paid: Yes ☒ No ☐

M09139

11021-11

November 14, 2011

6324-11

32718ACM

Mark McCabe
Senior Project ManagerAecom
250 Appollo Drive
Chelmsford, MA 0182

TERMS: Payment due upon receipt. An interest charge of 1 1/2% per month (18% per annum) will be charged on all invoices over 30 days. 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.

DESCRIPTION		AMOUNT
Project Location: Exeter Housing Authority 277 Water Street Exeter, NH 03833-1869		
Services Provided: November 2011 In accordance with ENPRO's signed Tabulation of Estimated Cost Range dated July 14, 2011, provided rental of roll-off containers and frac tanks for water storage at above referenced project site. Provided transportation of water waste, to an approved receiving facility, as per attached shipping document(s).		
Wednesday, November 09, 2011		
Task A1: Mobilization and set up of lined roll-off container		
Roll Off Container	11/1/11-11/9/11 9.00 Day @ 20.00	\$180.00
Task B1: Demobilization of Roll Off Container		
LABOR & EQUIPMENT		
Roll Off Truck c/w Operator	4.00 Hour Min @ 110.00	\$440.00
9.60% Energy - Insurance - Security (EIS) Recovery Fee Net of Fees and Taxes:		\$58.90
VISA / MASTERCARD / AMERICAN EXPRESS ACCEPTED FOR INVOICE PAYMENTS CREDIT CARD PROCESSING FEE MAY APPLY PROJECT BILLING PENDING		
APPROVED BY: A. Marzerka	ENPRO Appreciates Your Business	
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.		TOTAL
		\$678.90

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 028008593
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-NOV-11
Invoice Number: 37180040

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 : 24-SEP-11 to 28-OCT-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0400

Task Name : REPORTING

Employee Name/Title	Labor Bill Rate	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Warren, Laura A		P16	28-OCT-11	1.00	135.00	135.00
					1.00	135.00
Total Labor Bill Rate						135.00
Task Total : REPORTING						

Task Number : 0700

Task Name : ON SITE REPRESENT.

Employee Name/Title	Labor Bill Rate	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCabe, Mark M		P20	14-OCT-11	18.00	190.00	3,040.00	
McCabe, Mark M		P20	28-OCT-11	2.00	190.00	380.00	
McCarthy, Ryan S		P16	14-OCT-11	5.50	135.00	742.50	
					23.50	4,162.50	
Total Labor Bill Rate							
Expenditure Type	Reimbursable	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Miscellaneous - Allowable		McCarthy, Ryan S	14-OCT-11	EXP1452116	15.73	1.0800	16.99
						16.73	16.99
Total Reimbursable							
Task Total : ON SITE REPRESENT.						4,179.49	

Task Number : 0750

Task Name : MGP RESID. MGMT.

Employee Name/Title	Labor Bill Rate	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Harrison, Theresa A (Terril)		P11	14-OCT-11	1.00	92.50	92.50
					1.00	92.50
Total Labor Bill Rate						

Task Total : MGP RESID. MGMT.

92.60

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate					
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>
Harrison, Theresa A (Term)	P11	28-OCT-11	0.25	92.50	23.13
McCabe, Mark M	P20	30-SEP-11	5.00	190.00	950.00
McCabe, Mark M	P20	07-OCT-11	4.00	190.00	760.00
Rodriguez, Deanna L	P13	30-SEP-11	0.50	105.00	52.50
Rodriguez, Deanna L	P13	07-OCT-11	0.25	105.00	26.25
Rodriguez, Deanna L	P13	21-OCT-11	0.25	105.00	26.25
Total Labor Bill Rate			10.25		1,838.13
Task Total : MEETINGS & PROJ.MGMT					1,838.13

Lump Sum

Description
Computer/Telecomm/Copier @ 8% Labor per Contract

Billed Amt
373.69

Total Lump Sum

373.69

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION

6,618.81

OK RW
12/2/11
NW
30-40-00-00-187-29-00

ACE

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

LET ARJAYS HELP WITH ALL YOUR FALL
NEEDS...DUMPSTERS, CARPET EXTRACTORS, ETC
11/14/11 11:54AM AT 557 SALE

11/14/11 11:54AM AT 557 SALE
11/14/11 11:54AM AT 557 SALE
ACE PAINT PAIL 5 GALLON 5.99
18100VC 1 EA 7.99 EA W
1/8"X100' COLORS 7.99

SUB-TOTAL: 13.98 TAX:
DISCOUNT: TOTAL: 13.98
BC AMT: \$13.98

BK CARD#: XXXXXXXXXXXX1002
ID: 670121024399
AUTH: 566685 AMT: 13.98
Kee reference #:761559 Bat#0151
SHIPPED
CARD TYPE:AM EXPRESS EXPR: XXXX



=>> JRNL#H61559 <==
CUST # *2698
ACE REWARDS ID # 19773890129

ACE

THANK YOU RYAN S MCCARTHY
FOR YOUR PATRONAGE

RA

Name: X
Acct: RYAN MCCARTHY

DATE 10/14/2011 FRI TIME 14:07

General \$1.75
TOTAL \$1.75
CASH \$1.75
THANK YOU COME AGAIN Back
CLERK 1 509899 00002

THE SHACK THANKS YOU.

RADIO SHACK
MILFORD PLAZA SHOP CTR
RT 109 MEDWAY RD
MILFORD, MA 01757
(508) 473-3479

Last Valid Day for Return is 11/12/2011,
see back of receipt for full return policy

2800949 \$40.89
GIGA 6' USB TO SERIAL CABLE

SubTotal \$40.99
Tax 6.25% \$2.58
TOTAL \$43.55

Amex \$43.55
CHANGE \$0.00

Total Items Sold: 1

Card number: *****1002 N
Exp Date: 11/2012
Tran # 50437372
Authorization 524197
Host Captured Y \$43.55

Store: 011128 Register: 02 Tran: 4401
Operator: ZV Sales Associate: ZV
Ticket #: 024401 10/13/2011 10:19:07 AM



011128024401001101311006

OLIVER GREENE
63 1/2 E MAIN ST
MILFORD MA 01757
508-473-7528
Terminal ID: 90730795 0902
10/13/11 10:29 AM
VISA
Auth # 50989908599
CREDIT SALE
REF 1: 025
BATCH #: 155 AUTH #: 473052
AMOUNT \$8.09
APPROVED
THANK YOU
CUSTOMER COPY

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: 11-JAN-12
Invoice Number: 37199228

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-NOV-11 to 30-DEC-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0700

Task Name : ON SITE REPRESENT.

Labor Bill Rate						
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCabe, Mark M	P20	02-DEC-11	4.00	190.00	760.00	
McCabe, Mark M	P20	09-DEC-11	10.00	190.00	1,900.00	
McCabe, Mark M	P20	16-DEC-11	2.00	190.00	380.00	
Total Labor Bill Rate			16.00		3,040.00	

SubConsultant						
Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Professional Services	SPECTRUM ANALYTICAL INC	25-NOV-11	S1117414	447.00	1.0800	482.76
Professional Services	SPECTRUM ANALYTICAL INC	28-DEC-11	S1119773	382.00	1.0800	412.56
Total SubConsultant				829.00		895.32

Reimbursable						
Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Postage & Shipping	FEDERAL EXPRESS	07-NOV-11	768618116	16.48	1.0000	16.48
Total Reimbursable				16.48		16.48

Task Total : ON SITE REPRESENT.

3,951.80

Task Number : 0750

Task Name : MGP RESID. MGMT.

Labor Bill Rate						
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCarthy, Ryan S	P16	02-DEC-11	0.50	135.00	67.50	
McCarthy, Ryan S	P16	09-DEC-11	5.00	135.00	675.00	
McCarthy, Ryan S	P16	16-DEC-11	1.50	135.00	202.50	
Total Labor Bill Rate			7.00		945.00	

SubConsultant						
Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Outside Services - Allow	ENPRO SERVICES INC	07-DEC-11	1129411	3,063.26	1.0800	3,308.32
Total SubConsultant				3,063.26		3,308.32

Task Total : MGP RESID. MGMT.

4,253.32

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

<u>Labor Bill Rate</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>
<u>Employee Name/Title</u>					
Rodriguez, Deanna L	P13	02-DEC-11	0.50	105.00	52.50
Total Labor Bill Rate			0.50		52.50
Task Total : MEETINGS & PROJ.MGMT					52.50

<u>Lump Sum</u>	<u>Billed Amt</u>
<u>Description</u>	
Computer/Telecomm/Copier @ 6% Labor per Contract	242.25
Total Lump Sum	242.25
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION	8,499.87

<u>Invoice Summaries</u>	
Total Current Amount :	8,499.87
Retention Amount :	0.00
Pre-Tax Amount :	8,499.87
Tax Amount :	0.00
Total Invoice Amount :	8,499.87

<u>Billing Summaries</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
<u>Billing Summary</u>					
Billings	8,499.87	232,348.96	240,848.83		
Billing Total :	8,499.87	232,348.96	240,848.83		

OK
1/23/12
NU-NH

30-40-00 00-182-29-8



SPECTRUM ANALYTICAL, INC.

Featuring
HANIBAL TECHNOLOGY

INVOICE

To: AECOM Environment
250 Apollo Drive
Chelmsford, MA 01824
Attn: Accounts Payable

Date: November 25, 2011
Invoice Number: S1117414
Work Order No.: SB38617
RQN #: NA

Purchase Order No.:

Client Project No.: 60139731

Project Manager: Ryan McCarthy

Site Location: Unitil - Exeter, NH

The following charges are due for the above indicated samples submitted on 04-Nov-11.

Matrix	Analysis	Quantity	Unit Price	Total Price
Aqueous	Total RCRA8 Metals by SW846 6010B	1	\$58.00	\$58.00
Aqueous	Polychlorinated Biphenyls by SW846 8082	1	\$47.00	\$47.00
Aqueous	Semivolatile Organic Compounds by SW846 8270C	1	\$200.00	\$200.00
Aqueous	Volatile Organic Compounds	1	\$78.00	\$78.00
Aqueous	Cyanide, Amenable 10-204-00-1-A	1	\$21.00	\$21.00
Aqueous	Cyanide, Total	1	\$15.00	\$15.00
Aqueous	Reactive Cyanide	1	\$18.00	\$18.00
Metals Digestion		1	\$10.00	\$10.00
Subtotal				\$447.00
TOTAL AMOUNT DUE FOR SERVICES:				\$447.00

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

AECOM #: 41001

Payment is greatly appreciated. Thank you for your business!

Project #: 60139731
Task #: 0700 Professional Services
Expenditure Type: SUBC - SUBCONTRACT FEES
PO # (if applicable): 33412 ACM
PO Line # (if applicable):
Amount: 447.00
Date Approved: 11/29/11
Approval Signature: [Signature]
Approver's Employee #: 643137
Approver's Phone #: 978 905 2312
Pay When Paid: Yes ☒ No ☐

Payment Terms: Net 30 Days



SPECTRUM ANALYTICAL, INC.

Featuring

HANIBAL TECHNOLOGY

INVOICE

To: AECOM Environment
250 Apollo Drive
Chelmsford, MA 01824
Attn: Accounts Payable

Date: December 28, 2011
Invoice Number: S1119773
RQN #: NA

Work Order No.: SB40739

Purchase Order No.:

Client Project No.: 60139731

Project Manager: Ryan McCarthy

Site Location: Exeter Housing Authority - Exeter, NH

The following charges are due for the above indicated samples submitted on 10-Dec-11.

Matrix	Analysis	Quantity	Unit Price	Total Price
Aqueous	Total RCRA8 Metals by ICP	1	\$58.00	\$58.00
Aqueous	Semivolatile Organic Compounds	1	\$200.00	\$200.00
Aqueous	Volatile Organic Compounds	1	\$78.00	\$78.00
Aqueous	Volatile Organic Compounds	1	\$0.00	\$0.00
Aqueous	Cyanide, Amenable	1	\$21.00	\$21.00
Aqueous	Cyanide, Total	1	\$15.00	\$15.00
Metals Digestion		1	\$10.00	\$10.00
Subtotal				\$382.00
TOTAL AMOUNT DUE FOR SERVICES:				\$382.00

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

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

AECOM #: 41001

Payment Terms: Net 30 Days

Project #: 60139731
Task #: 0700 professional services
Expenditure Type: SUB-SUBCONTRACT FEES
PO # (if applicable): 33412 ACM
PO Line # (if applicable):
Amount: \$382.00
Date Approved: 1/3/12
Approval Signature: [Signature]
Approver's Employee #: 648678
Approver's Phone #: 978.925.2311
Pay When Paid: Yes ☒ No ☐

ENPRO**ENPRO Services, Inc.**

1000 Union Street, Exeter, New Hampshire 03833-1859

Exeter, Massachusetts 01950

Tel. (978) 465-2050

AECOM #: 41001

Project #: 60139731

Task #: 0750

Expenditure Type: Contractor

PO # (if applicable): 32718 ACM

PO Line # (if applicable):

Amount: \$3,063.26

Data Approved: 12/12/11

Approval Signature: [Signature]

Approver's Employee #: 648678

Approver's Phone #: 978-905-2311

Pay When Paid: Yes ☐ No ☐

M09130

com

INVOICE

11294-11

DATE:

December 7, 2011

JOB NO.

6324-11

PURCHASE

ORDER NO.

32718ACM

CONTACT:

Mark McCabe

Senior Project Manager

AECOM
250 Apollo I
Chelmsford

TERMS: Payment due upon receipt. An interest charge of 1½% per month (18% per annum) will be charged on all invoices over 30 days. 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.

DESCRIPTION		AMOUNT
Project Location: Exeter Housing Authority 277 Water Street Exeter, NH 03833-1859		
Services Provided: November 2011 In accordance with ENPRO's signed Tabulation of Estimated Cost Range dated July 14, 2011, provided rental of roll-off containers and frac tanks for water storage at above referenced project site. Provided transportation of water waste, to an approved receiving facility, as per attached shipping document(s).		
Wednesday, November 30, 2011		
Task C1: Disposal of Waste Rinse Water		
Vacuum Truck c/w Operator	4.00 HOUR @ 110.00	\$440.00
Scheduled Off-Loading of Bulk Liquid Waste	1.00 EVENT @ 350.00	\$350.00
Manifest No. NH200118021 (EMI):		
Disposal of Non DOT Non RCRA Non Regulated Material	3650.00 GALLON @ 0.55	\$2,007.50
9.50% Energy - Insurance - Security (EIS) Recovery Fee Net of Fees and Taxes:		\$265.76
VISA / MASTERCARD / AMERICAN EXPRESS ACCEPTED FOR INVOICE PAYMENTS CREDIT CARD PROCESSING FEE MAY APPLY PROJECT BILLING PENDING		
APPROVED BY: dmgd		ENPRO Appreciates Your Business
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.		TOTAL \$3,063.26

**Invoice Number**

7-686-18116

Invoice Date

Nov 07, 2011

Account Number

0021-0304-4

Page

17 of 31

Picked up: Nov 03, 2011

Cust. Ref.: 60137363.415

Ref.#2:

Payor: Shipper

Ref.#3:

- The Earned Discount for this ship date has been calculated based on a revenue threshold of \$56962.67
- Fuel Surcharge - FedEx has applied a fuel surcharge of 14.50% to this shipment.
- Distance Based Pricing, Zone 3

Automation CAFE
Tracking ID 452661161950
Service Type FedEx Priority Overnight
Package Type FedEx Envelope
Zone 03
Packages 1
Rated Weight N/A
Delivered Nov 04, 2011 09:59
Svc Area A1
Signed by D.DIXON
FedEx Use 00000000/0000197/_

Sender
TERRY GOODE
AECOM
250 APOLLO DRIVE
CHELMSFORD MA 01824 US

Recipient
JAMES LUKE, CHIEF
NYCDEP - BUREAU OF WATER
59-17 JUNCTION BLVD, 3RD FLOOR
ELMHURST NY 11373 US

Transportation Charge	21.25
Earned Discount	-2.34
Fuel Surcharge	1.20
Discount	-10.63
Total Charge	USD \$9.48

60137363.415 Reference Subtotal USD \$9.48

Picked up: Nov 03, 2011

Cust. Ref.: 60139731.0700

Ref.#2:

Payor: Shipper

Ref.#3:

- The Earned Discount for this ship date has been calculated based on a revenue threshold of \$56962.67
- Fuel Surcharge - FedEx has applied a fuel surcharge of 14.50% to this shipment.
- Distance Based Pricing, Zone 2

Automation CAFE
Tracking ID 452661161994
Service Type FedEx Priority Overnight
Package Type FedEx Box
Zone 02
Packages 1
Rated Weight 13.0 lbs, 5.9 kgs
Delivered Nov 04, 2011 09:46
Svc Area A2
Signed by K.WILKINSON
FedEx Use 00000000/0001486/_

Sender
TERRY GOODE
AECOM
250 APOLLO DRIVE
CHELMSFORD MA 01824 US

Recipient
SAMPLE RECEIVING
SPECTRUM ANALYTICAL INC.
11 ALMGREN DRIVE
AGAWAM MA 01001 US

Transportation Charge	38.90
Earned Discount	-4.06
Fuel Surcharge	2.09
Discount	-18.45
Total Charge	USD \$16.48

60139731.0700 Reference Subtotal USD \$16.48

Picked up: Nov 03, 2011

Cust. Ref.: 60147352.9

Ref.#2:

Payor: Shipper

Ref.#3:

- The Earned Discount for this ship date has been calculated based on a revenue threshold of \$56962.67
- Fuel Surcharge - FedEx has applied a fuel surcharge of 14.50% to this shipment.
- Distance Based Pricing, Zone 2

Automation CAFE
Tracking ID 452661161961
Service Type FedEx Standard Overnight
Package Type FedEx Box
Zone 02
Packages 1
Rated Weight 6.0 lbs, 2.7 kgs
Delivered Nov 04, 2011 12:21
Svc Area A1
Signed by R.WASSERMAN
FedEx Use 00000000/0001283/_

Sender
TERRY GOODE
AECOM
250 APOLLO DRIVE
CHELMSFORD MA 01824 US

Recipient
JAMIE DURAND
AECOM
10 ORMS ST
PROVIDENCE RI 02904 US

Transportation Charge	23.90
Earned Discount	-2.63
Discount	-11.95
Fuel Surcharge	1.35
Total Charge	USD \$10.67

60147352.9 Reference Subtotal USD \$10.67

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 028008593
SWIFT CODE BOFAUS3N



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
6 MCGUIRE STREET
CONCORD, NH 03301

Invoice Date: 03-FEB-12
Invoice Number: 37205691

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 : 31-DEC-11 to 27-JAN-12

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0700

Task Name : ON SITE REPRESENT.

Labor Bill Rate						
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCabe, Mark M	P20	06-JAN-12	1.50	190.00	285.00	
McCabe, Mark M	P20	20-JAN-12	2.00	190.00	380.00	
Total Labor Bill Rate				3.50		665.00
Task Total : ON SITE REPRESENT.						665.00

Task Number : 0750

Task Name : MGP RESID. MGMT.

Labor Bill Rate						
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCarthy, Ryan S	P16	06-JAN-12	1.00	135.00	135.00	
Total Labor Bill Rate				1.00		135.00
SubConsultant						
Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Outside Services - Allow	ENPRO SERVICES INC	05-JAN-12	1214411	4,298.99	1.0800	4,642.91
Total SubConsultant				4,298.99		4,642.91
Task Total : MGP RESID. MGMT.						4,777.91

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	P13	13-JAN-12	0.25	105.00	26.25	
Rodriguez, Deanna L	P13	20-JAN-12	0.50	105.00	52.50	
Total Labor Bill Rate				0.75		78.75
Task Total : MEETINGS & PROJ.MGMT						78.75

Lump Sum
Description
Computer/Telecomm/Copier @ 6% Labor per Contract

Billed Amt
62.73

Total Lump Sum

62.73

Project Total : 13046001 EXETER SEDIMENT INVESTIGATION

5,574.39

Invoice Summaries

Total Current Amount :

5,574.39

Retention Amount :

0.00

Pre-Tax Amount :

5,574.39

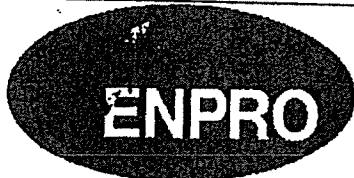
Tax Amount :

0.00

Total Invoice Amount :

5,574.39

OK
2/16/12
NU-NH
30-4000-00-182-29-01



ENPRO Services, Inc.

12 Mulliken Way, Newburyport, Massachusetts 01950

TEL. (978) 465-1595 FAX. (978) 465-2050

www.enpro.com

AECOM
250 Apollo Drive
Chelmsford, MA 01824

INVOICE 12144-11
DATE: January 5, 2012
JOB NO. 6324-11
PURCHASE ORDER NO. 32718ACM
CONTACT Mark McCabe

Mark McCabe
r Project Manager

AECOM #: 41001

Project #: 60139731.1168

Task #: 0750

Expenditure Type: Contractor

PO # (if applicable): 32718ACM

PO Line # (if applicable):

Amount: 4,298.99

Date Approved: 1/12/12

Approval Signature: [Signature]

Approver's Employee #: 648678

Approver's Phone #: 978-905-2311

Pay When Paid: Yes No ☒

M09130

TERMS: Payment due upon receipt. An interest charge of 1 1/2%
Should it be necessary to employ outside service, the
customer will pay all such cost, including

invoices over 30 days.
that the

DE

AMOUNT

Project Location: Exeter Housing Authority
277 Water Street
Exeter, NH 03833-1859

Services Provided: December 2011

In accordance with ENPRO's signed Tabulation of Estimated Cost Range dated July 14, 2011, provided rental of roll-off containers and frac tanks for water storage at above referenced project site. Provided transportation of water waste, to an approved receiving facility, as per attached shipping document(s).

RENTAL

Task A2: Mobilization and set up of 4,000g Poly Tank

RENTAL

Mobilization of 4000g Poly Tank	12/9/2011	1.00	EVENT	@	600.00	\$600.00
4000g Poly Above Ground Storage Tank	12/8/11 - 12/12/11	6.00	DAY	@	45.00	\$225.00

Monday, December 12, 2011

Task C1: Cleaning and Demob of 4,000 Gallon Poly Tank, Disposal of Rinse Water

LABOR

P. McCusker	Foreman	4.50	HOUR	@	60.00	\$270.00
B. Rider	Field Technician	4.50	HOUR	@	50.00	\$225.00

EQUIPMENT

Utility Truck c/w Small Hand and Power Tools	1.00	DAY	@	200.00	\$200.00
Confined Space Entry Equipment	1.00	DAY	@	150.00	\$150.00
Pressure Washer	1.00	DAY	@	150.00	\$150.00
Vacuum Truck c/w Operator	6.00	HOUR	@	110.00	\$660.00
Vacuum Truck Pre-Cleaning	1.00	EVENT	@	450.00	\$450.00

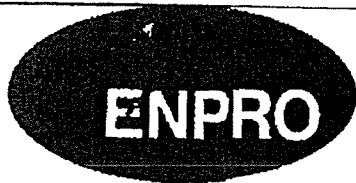
APPROVED BY:

ENPRO Appreciates Your Business

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.

TOTAL

Continued



ENPRO Services, Inc.

12 Mulliken Way, Newburyport, Massachusetts 01950

TEL. (978) 465-1595 FAX. (978) 465-2050

www.enpro.com

AECOM
250 Apollo Drive
Chelmsford, MA 01824

INVOICE 12144-11
DATE: January 5, 2012
JOB NO. 6324-11
PURCHASE ORDER NO. 32718ACM
CONTACT Mark McCabe
Senior Project Manager

TERMS: Payment due upon receipt. An interest charge of 1 1/2% per month (18% per annum) will be charged on all invoices over 30 days. 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.

DESCRIPTION						AMOUNT
Page 2 - Continued Exeter Housing Authority						
MATERIALS:						
EPA Modified Level "C" Personal Protective Clothing	1.00	SET	@	55.00	\$55.00	
TRANSPORTATION OF BULK WASTE:						
Manifesting, Loading, Transportation & Offload Fee	1.00	EVENT	@	350.00	\$350.00	
DISPOSAL OF BULK WASTE:						
Manifest No. NHZ00118133 (EWW):						
Disposal of Non DOT Non RCRA Non Regulated Material	1.00	GAL MIN	@	250.00	No Charge	
*125g						

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



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: 02-MAY-12
Invoice Number: 37233379

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 : 31-MAR-12 to 27-APR-12

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0160

Task Name : MAT PLACEMENT

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCarthy, Ryan S	P16	13-APR-12	5.50	135.00	742.50
McCarthy, Ryan S	P16	20-APR-12	5.50	135.00	742.50
McCarthy, Ryan S	P16	27-APR-12	2.50	135.00	337.50
Sylvester, Kaitlin N	P13	13-APR-12	4.00	105.00	420.00
Sylvester, Kaitlin N	P13	20-APR-12	4.00	105.00	420.00
Sylvester, Kaitlin N	P13	27-APR-12	3.00	105.00	315.00
Total Labor Bill Rate			24.50		2,977.50

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Meals	McCarthy, Ryan S	13-APR-12	EXP1741944	11.74	1.0800	12.68
Miscellaneous - Allowable	McCarthy, Ryan S	09-APR-12	EXP1724779	2,231.38	1.0800	2,409.89
Miscellaneous - Allowable	McCarthy, Ryan S	12-APR-12	EXP1741944	124.83	1.0800	134.82
Total Reimbursable				2,367.95		2,557.39

Task Total : MAT PLACEMENT

5,534.89

Task Number : 0700

Task Name : ON SITE REPRESENT.

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
McCabe, Mark M	P20	20-APR-12	3.00	190.00	570.00
McCabe, Mark M	P20	27-APR-12	4.00	190.00	760.00
McCarthy, Ryan S	P16	06-APR-12	2.00	135.00	270.00
Millard, Joshua C (Josh)	P15	20-APR-12	1.00	125.00	125.00
Total Labor Bill Rate			10.00		1,725.00

SubConsultant

Employee Name/Title	Title/Expenditure	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Professional Services	SPECTRUM ANALYTICAL INC.	26-MAR-12	S1204461	780.00	1.0800	842.40
Professional Services	DRILEX ENVIRONMENTAL INC	27-MAR-12	6160	3,291.50	1.0800	3,554.82
Total SubConsultant				4,071.50		4,397.22

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Miscellaneous - Allowable	Callahan, Colin P	05-MAR-12	EXP1706215	7.59	1.0800	8.20
Miscellaneous - Allowable	Callahan, Colin P	15-MAR-12	EXP1706215	16.00	1.0800	17.28
Rent - Equipment	US ENVIRONMENTAL RENTAL CORP	06-APR-12	RN45166	31.88	1.0800	34.43

Reimbursable						
Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Rent - Vehicles	ENTERPRISE RENT A CAR	21-MAR-12	D238674	125.48	1.0800	135.52
Total Reimbursable				180.95		195.43
Task Total : ON SITE REPRESENT.						6,317.65

Task Number : 0750

Task Name : MGP RESID. MGMT.

Reimbursable						
Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Outside Contractors	ENPRO SERVICES INC	26-MAR-12	0315012	1,545.89	1.0800	1,669.56
Total Reimbursable				1,545.89		1,669.56
Task Total : MGP RESID. MGMT.						1,669.58

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	P13	06-APR-12	0.25	105.00	26.25	
Rodriguez, Deanna L	P13	20-APR-12	0.25	105.00	26.25	
Total Labor Bill Rate			0.50		52.50	
Task Total : MEETINGS & PROJ.MGMT						52.50

Lump Sum		Billed Amt
Description		
Computer/Telecomm/Copier @ 6% Labor per Contract		285.30
Total Lump Sum		285.30
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION		13,859.90

Invoice Summaries	
Total Current Amount :	13,859.90
Retention Amount :	0.00
Pre-Tax Amount :	13,859.90
Tax Amount :	0.00
Total Invoice Amount :	13,859.90

Billing Summaries					
Billing Summary	Current	Prior	Total	Limit	Remain
Billings	13,859.90	282,453.59	296,313.49	350,385.00	54,071.51
Billing Total :	13,859.90	282,453.59	296,313.49		

Outstanding Invoices		
Invoice Number	Invoice Date	Invoice Balance
37215794	05-MAR-12	7,151.80
37226398	10-APR-12	28,678.57
Outstanding Total :		36,030.37

OK TR
NO-NH
5/7/12
182-29-00

B Confirmation

Expense report number EXP1741944 for 126.57 has been submitted to Supplement, Maura K for approval.

Expense Report EXP1741944

If the link from the homepage form to include all displayed information, click your browser back button to view the previous 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 2-102(1) sheet paper.
Place the "Expense Lines" and "Expense Allocation" 10 pages and attach all required receipts to a 2-102(1) sheet paper.
Place this page and the original receipts in an envelope, and send to Accounts Payable along with the transaction sheet (unless otherwise instructed by your supervisor).

Your manager (or requesting 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 will file the receipt.

If your manager does not take action within 7 days the expense report will be escalated to another manager for approval. To see the status and current approval for your expense report, please visit the Expense homepage and view the information under the "Track Submitted Expense Report" region.

General Information

Employee Name: Maura K, Ryan B (648137)
Expense Dates: 12-Apr-2012 - 13-Apr-2012
Cost Center (DEPT): 8827

Detailed Business Purpose: project expenses

Approval: Supplement, Maura K

Receipts Status: Required

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 policy.

Expense Lines

Expense Allocations Weekly Summary Approvals Memo (7)

Business Expenses

Cash Expenses

Receipt

Amount Expense Type Justification

12-Apr-2012 126.43 USD MSC Miscellaneous project

13-Apr-2012 11.74 USD TMA Meals lunch

Expense Lines

Expense Allocations Weekly Summary Approvals Memo (7)

Business Expenses

Cash Expenses

Receipt

Amount Expense Type Justification

12-Apr-2012 126.43 USD MSC Miscellaneous project

13-Apr-2012 11.74 USD TMA Meals lunch

Expense Lines

Expense Allocations Weekly Summary Approvals Memo (7)

Business Expenses

Cash Expenses

Receipt

Amount Expense Type Justification

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Business Expenses

Cash Expenses

Receipt

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Expense Lines

Expense Allocations Weekly Summary Approvals Memo (7)

Business Expenses

Cash Expenses

Receipt

Amount Expense Type Justification

12-Apr-2012 126.43 USD MSC Miscellaneous project

13-Apr-2012 11.74 USD TMA Meals lunch

Expense Lines

https://crpdpappp.aecomnet.com/OA_HTML/OA.jsp?page=/oracle/apps/ap/oi/entry/summary/webui/ConfirmationPG&_t=178... 4/18/2012

LAS OJAS taqueria

Amount: 11.74

DATE: 04/13/2012 TIME: 12:27:42 PM
CASHIER ID: 01

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

METH:SWIPE TYPE:CREDIT ACTN:SALE
AMNT:11.74 NAME:MCCARTHY/RYAN CARD:8599
ISSU:VISA APRV:02296B AUTH:497892086
RREF:<497892086/> 210448676474 CVVM:NO
MATCH ZIPM:NO MATCH

signature



CUSTOMER COPY

McCarthy, Ryan

From: Ryan McCarthy [ryanscottmc@hotmail.com]
Sent: Thursday, April 12, 2012 9:32
To: McCarthy, Ryan
Subject: FW: Your Invoice from GEMPLER'S

-----Original Message-----

From: GEMPLER'S
Sent: 12 Apr 2012 13:15:11 GMT
To: ryanscottmc@hotmail.com
Subject: Your Invoice from GEMPLER'S

Your Invoice from Gempler's

GEMPLER'S

1-800-382-8473

Order Invoice

INVOICE FOR ORDER NUMBER SC09532856

Thank you for your order! Below you'll find details regarding your recent purchase. In accordance with your preferences you will not receive a paper copy of this notification. If you have any questions or need help regarding any of the information contained in this invoice please send an email to invoice@gemplers.com and we will respond within 24 hours. Or you can call us, toll-free, at 1-800-382-8473 anytime.

Order Number	P.O. Number	Sold To Number	Invoice Number	Invoice Date	Due Date
SC09532856	MCCARTHY04102012	6202828	1018757307	4/11/2012	4/11/2012

Buyer	Carrier	Freight Terms	Ship Date	Payment Terms
	UPSGGND	LOCKED	4/10/2012	Paid by CCD

Billing Information

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

Shipping Information

MCCARTHY,RYAN
15 WESTSIDE DR
EXETER NH 03833-4215

Order Details

Item No.	Description	Price
<u>113145</u>	TREE ANCHOR 15 IN CSTL Back Ordered: 0 Shipped: 2	Unit Price: \$54.49 Total: \$108.98
Subtotal:		\$108.98
Freight:		\$15.85

Taxes: \$0.00
Charged to *****8598: \$124.83
Paid With Credit Card -
Balance Due: \$0.00

NEW! PRODUCTS
➤ [View all](#)

**We find them.
We sort them.
We guarantee them.**

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

After 90 days from invoice date, GHC Specialty Brands, LLC will not be responsible to show proof of delivery.

TITLE TO ALL MERCHANDISE SHIPPED PASSES TO THE PURCHASER UPON DELIVERY TO THE COMMON CARRIER. NO CLAIMS, DEDUCTIONS OR RETURNS ACCEPTED WITHOUT OUR WRITTEN CONSENT. ALL CLAIMS MUST BE MADE WITHIN 15 DAYS AFTER RECEIPT OF GOODS. ALL PRICES SUBJECT TO CHANGE WITHOUT NOTICE. PRICES PREVAILING ON TIME OF DELIVERY. THE GOODS COVERED BY THIS INVOICE WERE PRODUCED IN COMPLIANCE WITH THE REQUIREMENTS OF THE FAIR LABOR STANDARDS ACT OF 1938 AS AMENDED.

THESE COMMODITIES ARE LICENSED FOR THE ULTIMATE DESTINATION SHOWN. DIVERSION CONTRARY TO THE UNITED STATES LAW IS PROHIBITED. CUSTOMER HEREBY UNCONDITIONALLY AND WITHOUT RESERVATION AGREES THAT GHC SPECIALTY BRANDS, LLC IS ENTITLED TO ENFORCE THE TERMS OF THIS SHIPPING ORDER UNDER THE LAWS OF THE STATE OF ILLINOIS AND IN AN ILLINOIS FORUM.

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GEMPLER'S | 1125 Deming Way | P.O. Box 44993 | Madison, WI 53744-4993
FEI #: 39-1726218 | Invoice Questions: 1-800-382-8473
© 2012 GHC Specialty Brands, LLC

Confirmation

Expense report number EXP1724779 for 245382 has been submitted to Supplement, Maurice K for approval.

Expense Report EXP1724779

Print: Print in landscape format to include as 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 Expense Fiscal Worksheet (if you used the Excel Import method).

Place this page and the original receipts in an instruction envelope, and send to Accounts Payable along with the reimbursement 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 will be the recipient.

If your manager does not take action within 7 days the expense report will be escalated to higher manager for approval. To see the status and current approval for your expense report, please revisit the Expense homepage and view the information under the "Track Submitted Expense Report" region.

General Information

Employee Name: Mackenzie, Ryan S (548137)

Expense Dates: 02-Apr-2012 - 02-Apr-2012

Cost Center (DEPT): 5827

Detailed Business Purpose: expenses

Approver: Supplement, Maurice K

Receipts Status: Required

Signature: [Signature]

AECOM US

I certify the attached expense report contains all 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

Receipt

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

Organization

Business Purpose

Date

Amount

Expense Type

Justification Name

Receipt

Required

Receipt

Missing

Attachments Details

Reimbursable Amount (USD)

Country Name

Guest's Name

Guest's Title

* PRELIMINARY INVOICE *

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

B/T: 6220 B/T: 6220

SOLE TO: AECOM, INC.
DBA AECOM ENVIRONMENT
3 TECHNOLOGY PARK DRIVE

WESTFORD MA 01886

INVOICE NO: 282350
INVOICE DATE: 4/09/12
SHIP DATE: 4/05/12
ORDER DATE: 4/05/12
PYMT TERMS: NET 30 DAYS
PRT TERMS: PREPAID & ADD
SALESPERSON: / MKT:RP

02 SHIPTO

AECOM - ATTN: TONY TEXIERA
277 WATER STREET
EXETER HOUSING AUTHORITY

EXETER NH 03833

P.O.B: RYAN MCCARTHY E-MAIL

VIA: ESTER 054-2070009 SHIP FROM
CRTCO CARTERSVILLE
POB ORIGIN

COMMENTS: 5 ROLLS OF RCM-OC

5' X 15', SQUARE FOOTAGE PER ROLL - 75 SQUARE FEET

SHIPPED QTY	U/M	PRICING QTY	U/M	UNIT PRICE	EXT. AMOUNT
375.00	SP	375.00	SP	5.00	1875.00
REACTIVE CORR MAT ORGANO CLAY					
RCM w/ BLK N/W & Movan					
CAR/VEHICLE #: ESTER 054-2070009					

MISC: QTY	DESCRIPTION	UNIT PRICE	EXT. AMOUNT
1.0000	CRTCO-PFD&ADD FREIGHT	356.38	356.38

TOTAL UNITS 375.0000 SALES TAX
TOTAL POUNDS 481.1250

REMIT \$ 2,231.38

PURCHASER MAY BE LIABLE FOR USE TAX

PAGE 1

TOTAL INVOICE

2,231.38

AECOM #: 41001

Project #: 60139731

Task #: 700

Expenditure Type: Lab

PO # (if applicable):

PO Line # (if applicable):

Amount: \$700.00

Date Approved: 4/16/12

Approval Signature: [Signature]

Approver's Employee #: 648678

Approver's Phone #: 978-905-2311

To: AECOM Environment
250 Apollo Drive
Chelmsford, MA 01824
Attn: Accounts Payable

Pay When Paid: Yes ☐ No ☒

409138

March 26, 2012

Invoice Number: S1204461

RQN #: NA

Work Order No.: SB45785

Purchase Order No.:

Client Project No.: 60139731

Project Manager: Mark McCabe

Site Location: Exeter MGP - Exeter, NH

The following charges are due for the above indicated samples submitted on 21-Mar-12.

Matrix	Analysis	Quantity	Unit Price	Total Price
Aqueous	Total Copper by ICP	2	\$6.00	\$12.00
Aqueous	Total Nickel by ICP	2	\$6.00	\$12.00
Aqueous	Total RCRA8 Metals by ICP	2	\$58.00	\$116.00
Aqueous	Total Zinc by ICP	2	\$6.00	\$12.00
Aqueous	Semivolatile Organic Compounds	2	\$200.00	\$400.00
Aqueous	Volatile Organic Compounds	2	\$78.00	\$156.00
Aqueous	Volatile Organic Compounds	1	\$0.00	\$0.00
Aqueous	Cyanide, Total	2	\$15.00	\$30.00
Aqueous	Total Suspended Solids	2	\$11.00	\$22.00
Metals Digestion		2	\$10.00	\$20.00
Subtotal				\$780.00
TOTAL AMOUNT DUE FOR SERVICES:				\$780.00

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

Drilex Environmental, Inc.

127 Hartwell Street, Suite 2
West Boylston, MA 01583

Invoice Number: 6160
Tuesday, March 27, 2012

Invoice

To: AE Com Environmental
250 Apollo Drive
Chelmsford, MA 01824
Attention: Joshua Millard

Project: D3491-12

Water St. & Green St.
Exeter, NH

AECOM #: 41001

Project #: 60139731

Task #: 0700

Expenditure Type: SURC - Professional Services

PO # (if applicable): 36398ACM

PO Line # (if applicable): 1

Amount: \$3,291.50

Date Approved: 4-17-12

Approval Signature: Joshua P. Millard

Approver's Employee #: 648692

Approver's Phone #: 978, 905-2324

Pay When Paid: Yes ☒ No ☐

1000130

Professional Services for the Period: 3/15/2012 to 3/15/2012

Billing Group: 001

Mob to Site, Drill and Install (4) 1" PVC MWs to 9' Each and (1) 4" PVC MW to 20' b.g.s. Finish w/ Flush Mounted Roadboxes, Locking Gripper Plugs and Concrete Collars (pad for 4" well). Drum Cuttings, Restore Site & Demob.

Contract #: PO# 36398ACM - Josh Millard

Equipment

	Date	Bill Units	Unit Bill Rate	Charge
CME-75 Drill Rig & Crew	3/15/2012	1.00	\$1,250.00 Per Day	\$1,250.00
CME-75 Drill Rig Mobilization/Demobilization	3/15/2012	3.25	\$100.00 Per Hour	\$325.00
Mobile Support Truck	3/15/2012	1.00	\$150.00 Per Day	\$150.00

Equipment Totals: \$1,725.00

Materials

	Date	Bill Units	Unit Bill Rate	Charge
Sand, Silica (#1 or #2)	3/15/2012	22.00	\$10.00 Per Bag	\$220.00
Bentonite Chips - 50lbs.	3/15/2012	3.00	\$25.00 Per Bag	\$75.00
17-H D.O.T. 55 Gallon Steel Drum	3/15/2012	6.00	\$50.00 Each	\$300.00
Redj - Mix Cement - 80lb Bag	3/15/2012	6.00	\$12.00 Per Bag	\$72.00

Drillex Environmental, Inc.
Project: D349J-12

Tuesday, March 27, 2012
Invoice: 6160

Materials Continued...

	<u>Date</u>	<u>Bill Units</u>	<u>Unit Bill Rate</u>	<u>Charge</u>
6" Roadbox	3/15/2012	4.00	\$62.00 Each	\$248.00
8" MW Roadbox	3/15/2012	1.00	\$65.00 Each	\$65.00
4" Gripper Plug	3/15/2012	1.00	\$24.00 Each	\$24.00
4" Slip Point	3/15/2012	1.00	\$24.00 Each	\$24.00
4" PVC Riser	3/15/2012	10.00	\$9.00 Per Foot	\$90.00
4" PVC Screen	3/15/2012	10.00	\$11.25 Per Foot	\$112.50
1" Gripper Plug	3/15/2012	4.00	\$14.00 Each	\$56.00
1" Slip Point	3/15/2012	4.00	\$8.00 Each	\$32.00
1" PVC Riser	3/15/2012	12.00	\$4.00 Per Foot	\$48.00
1" PVC Screen	3/15/2012	40.00	\$5.00 Per Foot	\$200.00

Materials Totals: \$1,566.50

Billing Group Subtotal: \$3,291.50

Project Totals:

***** Total Project Invoice Amount:**

\$3,291.50

Net Upon Receipt. A late charge of 1.5% will be added to any unpaid balance after 30 days.

AECOM

SUPPLIER NO: 11513

SUPPLIER: ORLIK ENVIRONMENTAL INC
127 HARTWELL STREET SUITE 2
WEST BOYLSTON, MA 01583

PURCHASE ORDER	
PURCHASE ORDER NUMBER 38386ACM	REVISION 0
PAGE 1 of 1	
This Purchase Order Number must appear on all order acknowledgments, invoices, packing lists, cartons and correspondence.	
BILL TO: 250 Apollo Drive Chatham, MA 01824 United States	

DATE OF ORDER 13-MAR-12		BUYER Fenzer, Arlene		REQUESTOR Mellor, Joshua C (Josh)	
PAYMENT TERMS NET 30 DAYS		SHIP VIA		F.O.B.	
LINE NUM	ITEM NUMBER/DESCRIPTION	NEED BY DATE	QUANTITY	UNIT	AMT
1	Drilling services, Project No 50139731.0700 Drill 5 borings to 13 feet bgs. Convert one boring to a 4-inch monitoring well and 4 borings to 1-inch Piezometers. All wells to be completed with flush mount road boxes. Detail scope and cost estimate attached. The Purchase Order subject to AECOM CSA with Orlik Environmental. Please sign and return to the Project Manager.				4,400.00
TAX			4,400.00		
SUB TOTAL \$			4,400.00		
TOTAL \$			4,400.00		

THIS PURCHASE ORDER IS SUBJECT TO THE ATTACHED TERMS AND CONDITIONS
Date
3/14/12
SUPPLIER SIGNATURE

ORACLE Expense Reports

Expenses Home | Expense Reports | Credit Card Transactions | Access Authorizations | Projects and Tasks | Payments Search

Confirmation

Expense report number EXP1706215 for 23.59 has been submitted to Mosquera, Justin L. for approval.

Expense Report EXP1706215

[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 B-1/2x11 sheet paper.
- Both the "Expense Lines" Tab and "Expense Allocations" Tab pages need to be printed.
- Print and sign the Expense 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 visit the Expense homepage and view the information under the "Track Submitted Expense Reports" region.

General Information

Employee Name: Calhan, Colin P (647972)
Expense Dates: 05-MAR-2012 - 15-MAR-2012
Cost Center (DEPT): 5828
Detailed Business Purpose: Export Drilling
Approver: Mosquera, Justin L.
Receipts Status: Not Required

AECOM US

Signature

I certify the claimed 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 Name	Merchant	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country Name	Guest's Name	Guest's Title	Organization	Business Purpose
15-Mar-2012		14.00 USD	MISC-	lunch						14.00					
05-Mar-2012		5.59 USD	MISC-	lunch						5.59					

https://erpexpa.recommet.com/CA_HTML/CA.jsp?page=foracel/expense/summary/webui/FinalReviewP_C&_P=43071513&rel...

[illegible]

Expense Line	Expense Allocations	Weekly Summary	Approval Notes (N)
--------------	---------------------	----------------	--------------------

EXPENSES | Contract Us | Home | About | Preferences

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Physics Statement

Return Create New Expense Report Printable Page

Lee Glas Taqueria

Amount: 12.71

DATE: 03/15/2012 TIME: 5:07:18 PM.
CASHIER ID: 44

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

METH:SWIPE TYPE:CREDIT ACTN:SALE
AMNT:12.71 NAME:CALLAHAN/COLIN P
CARD:7152 ISSU:VISA APY:00859B
AUTH:480668428 RREF:<>480668428</>
207547304264 CVVN:NO MATCH ZIP:NO MATCH

Tip = 1.29
Total = \$14.00

signature



CUSTOMER COPY

Order Number: 640
Drive-Thru

Welcome to Dunkin' Donuts
Store #381734
61 Portsmouth Ave, Exeter, NH 03833
603-778-8535
3/5/2012 12:29:56 PM

Register:5 Tran Seq No: 2179640
Cashier: Tina D.

1 Ht Coff MD 071681nd 1.83
1 Trk MC Ban Roll 3.69
1 TurckedDonutHt071681nd (0.39)

Sub. Total: \$5.13
Tax: \$0.46
Total: \$5.59
Discount Total: (\$0.39)

Change \$0.00
Visa: \$5.59



**U.S. Environmental
Rental Corporation**
Rentals • Sales • Service
usenvironmental.com

Waltham, MA (617) 899-1560 East Hartford, CT (860) 289-8700 Hamilton, NJ (609) 670-8555 Tampa, FL (813) 628-4200

U.S. Environmental Rent
166 Riverview Avenue
Waltham, MA 02453
Phone No.: 781-899-1560

INVOICE

Invoice Number: RN45166
Invoice Date: 04/06/12
Page: 1

Bill

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

Ship

To: AECOM, Inc. - Chelmsford, MA
Justin Mosquera
Unitil, Exeter, NH
250 Apollo Drive
Chelmsford, MA 01824

Customer ID AECOME001
Ship Via Customer Pickup- 7:00AM
Terms Net 30 Days
Due Date 05/06/12

P.O. Number 647972
P.O. Date 03/14/12
Our Order No. RR40086
Salesperson William Jouris

Items Rented

Item / Description	Quantity	Rental Term	From / Thru	Unit Price	Total Price
SOLM101 Solinst Model 101 Water L 300'	1 Each	1 Day	03/15/12 03/15/12	10.00	10.00
LAMOTT2020 LaMotte 2020; Turbidimeter	1 Each	1 Day	03/15/12 03/15/12	20.00	20.00

AECOM #: 41001
Project #: 60139731
Task #: 0700
Expenditure Type: OFF-Road EQUIP
PO # (if applicable): -
PO Line # (if applicable): -
Amount: \$ 31.88
Date Approved: 4/13/12
Approval Signature: [Signature]
Approver's Employee #: 647972
Approver's Phone #: 978-905-2139
Pay When Paid: Yes ☐ No ☒

409130

----- Tax Breakdown -----
MA Tax Liable 1.88

Subtotal: 30.00
Tax: 1.88
Total: **31.88**

Rental Invoice



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Bill To:

9400033-D0812J00075-F-18300000

AECOM INC DBA AECOM ENVIRONMENT
ATTN: UNKNOWN**
250 APOLLO DRIVE
CHELMSFORD MA 01824

RENTAL INFORMATION

Date Out 3/19/12 1:11PM Date In 3/21/12 12:14P
Renter JULIEN CHAMBERT

Additional Driver

Name
NO OTHER DRIVER PERMITTED

RENTAL VEHICLES CLAIM INFORMATION

Color	License No.	Claim #/Policy #/P.O. #
SILVER	712P25	CHAMBERT
Model	Unit #	Insured
11 DURA	7FQ3CB	
Date of Loss	Type of Loss	
Type of Car	Repair Shop	

Rental Agreement

0238674 - 10U8

BILLING DETAIL

Description	Rate	Amount
2 DAYS @	57.00	114.00
VLCREC FEE		3.50
PKGSCH		.60
SALES TX %	6.25	7.38

AECOM #: 41001

Project #: 60139731

Task #: 0700

Expenditure Type: RENTAL-FIELD VEHICLE

PO # (if applicable): OFF-Rent - Vehicles

PO Line # (if applicable):

Amount: \$125.48

Date Approved: 3/29/2012

Approval Signature:

Approver's Employee #: 657445

Approver's Phone #: 978 905 2157

Pay When Paid: Yes No ☒

100130

AMOUNT DUE..... 125.48

IMPORTANT INFORMATION

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

Thank You For Choosing Enterprise

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



Please Return This Portion with Remittance

Remit to:

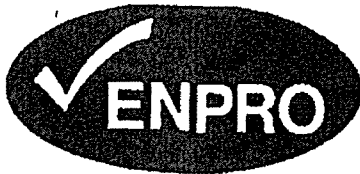
ENTERPRISE RENT-A-CAR
ATTN: ACCTS RECEIVABLE
P.O. BOX 414373
BOSTON MA 02241-4373

Paid by:

AECOM INC DBA AECOM ENVIRONMENT
ATTN: UNKNOWN**
250 APOLLO DRIVE
CHELMSFORD MA 01824

Customer#	Rental Agreement	Amount	GPBR
999999	0238674	125.48	10U8

03/23



ENPRO Services, Inc.

12 Mulliken Way, Newburyport, Massachusetts 01950
TEL. (978) 465-1595 FAX. (978) 465-2050

www.enpro.com

AECOM #: 41001

Project #: 603931

Task #: 750

Expenditure Type: Contractor

PO # (if applicable): _____

PO Line # (if applicable): _____

Amount: \$1,545.89

Date Approved: 4/16/12

Approval Signature: [Signature]

Approver's Employee #: 648678

Approver's Phone #: 978-905-2321

03150-12

March 26, 2012

1085-12

32716ACM

Mark McCabe
Senior Project Manager

AECOM
250 Apollo Drive
Chelmsford, MA 01824

TERMS: Payment due upon receipt. An invoice should be necessary to a customer will pay

Pay When Paid: Yes ☐ No ☒

will be charged on all invoices over 30 days.
specifically agreed that the

100130

an such cost, including reasonable attorney's fees and court costs.

DESCRIPTION							AMOUNT
Project Location: Exeter Housing Authority 277 Water Street Exeter, NH 03833-1859							
Monday, March 19, 2012							
In accordance with ENPRO Services, Inc. (ENPRO)'s Master Price Agreement (MPA) dated March 16, 2010 and e-mail from Mark McCabe of AECOM dated March 13 2012, provided qualified personnel, equipment and materials for the mobilization, demobilization, rental and confined space cleaning of (1) One 21000 gallon capacity frac tank.							
TRANSPORTATION OF DRUM AND ABSORBENT SUPPLIES:							
Transportation of Supplies	1.00	EVENT	@	50.00		\$50.00	
MATERIALS:							
DOT Shipping Container - 85 gal Poly Salvage Drum	1.00	DRUM	@	195.00		\$195.00	
Absorbent Boom	4.00	LENGTH	@	45.00		\$180.00	
TRANSPORTATION:							
Mobilization of Frac Tank	1.00	EVENT	@	450.00		\$450.00	
RENTAL:							
Frac Tank	3/19/12 - 3/31/12	12.00	DAY	@	45.00	\$540.00	
8.25% Energy - Insurance - Security (EIS) Recovery Fee Net of Fees and Taxes:							\$130.89
VISA / MASTERCARD / AMERICAN EXPRESS ACCEPTED FOR INVOICE PAYMENTS CREDIT CARD PROCESSING FEE MAY APPLY							
PROJECT PENDING: Confined Space Entry Cleaning ENPRO Appreciates Your Business							
APPROVED BY: kpc							
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.							TOTAL
							\$1,545.89

Check Payment to:
AECOM Inc.
An AECOM Company
1178 Payscale 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



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

Federal Tax ID No.
08-0852759

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

Invoice Date: 04-JUN-12
Invoice Number: 37242789

Agreement Number: EM13048001
Agreement Description: Approved TAR No.2-22

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139731
Bill Through Date : 28-APR-12 to 25-MAY-12

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0150

Task Name : MAT PLACEMENT

Labor Bill Rate						
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCarthy, Ryan S	P16	18-MAY-12	0.50	135.00	67.50	
McCarthy, Ryan S	P16	25-MAY-12	0.50	135.00	67.50	
Total Labor Bill Rate			1.00		135.00	

Reimbursable						
Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Miscellaneous - Allowable	McCarthy, Ryan S	19-APR-12	EXP1749889	161.33	1.0800	174.24
Total Reimbursable				161.33		174.24
Task Total : MAT PLACEMENT						309.24

Task Number : 0700

Task Name : ON SITE REPRESENT.

Labor Bill Rate						
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCabe, Mark M	P20	11-MAY-12	2.00	190.00	380.00	
McCabe, Mark M	P20	18-MAY-12	2.00	190.00	380.00	
McCabe, Mark M	P20	25-MAY-12	2.00	190.00	380.00	
Total Labor Bill Rate			6.00		1,140.00	

Reimbursable						
Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Travel All Other	Chambert, Julien	20-MAR-12	EXP1753039	45.36	1.0800	48.99
Travel All Other	Chambert, Julien	20-MAR-12	EXP1753439	1.50	1.0800	1.62
Travel All Other	Chambert, Julien	21-MAR-12	EXP1753439	1.50	1.0800	1.62
Total Reimbursable				48.36		52.23
Task Total : ON SITE REPRESENT.						1,192.23

Task Number : 0750

Task Name : MGP RESID. MGMT.

SubConsultant		Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Employee Name/Title	Title/Expenditure					
Outside Services - Allow	ENPRO SERVICES INC	01-MAY-12	0416712	1,474.88	1.0800	1,592.87
Total SubConsultant				1,474.88		1,592.87
Task Total : MGP RESID. MGMT.						1,592.87

Task Number : 0800

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate		Date	Hours	Bill Rate	Billed Amt
Employee Name/Title	Title/Expenditure				
Rodriguez, Deanna L	P13	04-MAY-12	0.50	105.00	52.50
Rodriguez, Deanna L	P13	11-MAY-12	0.25	105.00	26.25
Total Labor Bill Rate			0.75		78.75
Task Total : MEETINGS & PROJ.MGMT					78.75

Lump Sum		Billed Amt
Description		
Computer/Telecomm/Copier @ 6% Labor per Contract		81.23
Total Lump Sum		81.23
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION		3,254.32

Invoice Summaries		Billed Amt
Total Current Amount :		3,254.32
Retention Amount :		0.00
Pre-Tax Amount :		3,254.32
Tax Amount :		0.00
Total Invoice Amount :		3,254.32

Billing Summaries					
Billing Summary	Current	Prior	Total	Limit	Remain
Billings	3,254.32	296,313.49	299,567.81	350,385.00	50,817.19
Billing Total :	3,254.32	296,313.49	299,567.81		

Outstanding Invoices		
Invoice Number	Invoice Date	Invoice Balance
37215794	05-MAR-12	7,151.80
37233379	02-MAY-12	13,859.90
Outstanding Total :		21,011.70

OK 82
6/8/12
NU-NH
30-40-0000-188-29-00

B Confirmation

Expense report number EXP1749889 for 161.33 has been submitted to Surprenant, Maura K for approval.

Expense Report EXP1749889

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 this Expense 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).

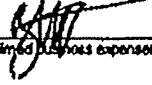
Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

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 Expense homepage and view the information under the "Track Submitted Expense Reports" region.

General Information

Employee Name	McCarthy, Ryan B (648137)	Report Submit Date	25-APR-2012
Expense Dates	18-APR-2012 - 19-APR-2012	Attachments	View
Cost Center (DEPT)	6427	Report Total	161.33 USD
Detailed Business Purpose	project expenses	Reimbursement Amount	161.33 USD
Approver	Surprenant, Maura K		
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

Expense Lines Expense Allocations Weekly Summary Approval Notes (0)

Business Expenses**Cash Expenses**

Date	Receipt Expense		Merchant	Receipt	Receipt	Attachments	Details	Reimbursable Amount		Guest's	Guest's	Organization	Business
	Amount	Type		Required	Missing			(USD)	Country				Purpose
10-Apr-2012	161.33	MISC-USD Miscellaneous	project					161.33					
Total								161.33					

Expense Lines Expense Allocations Weekly Summary Approval Notes (0)

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LOWE'S
LOWE'S HOME CENTERS, INC.
36 FRESH RIVER ROAD
EPPING, NH 03042 (603) 693-3000

- SALE -

SALES#: FSTLANE3 13 TRANS#: 5872539 04-19-12

307987 RETRACTABLE UTILITY KNIFE	1.98
76329 8" BLK CABLE TIES 100CT/5	6.82
301614 EGRIP WEEDEE	8.98
348252 3/8"X45' REC GALV CHAIN	143.55
3.75 DISCOUNT EACH	-0.56
45.0	3.19

SUBTOTAL: 161.33

TAX: 0.00

INVOICE 05276 TOTAL: 161.33

AMEX: 161.33

TOTAL DISCOUNT: 25.20

AMEX:XXXXXXXXXXXX2000 AMOUNT:161.33 AUTHCD:539304

SHIPPED REFID:072551255105 04/19/12 17:55:51

STORE: 2551 TERMINAL: 05 04/19/12 17:55:57

OF ITEMS PURCHASED: 4

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: CAREY DAX

WE HAVE THE LOWEST PRICES, GUARANTEED!
IF YOU FIND A LOWER PRICE, WE WILL BEAT IT BY 10%.
SEE STORE FOR DETAILS.

YOUR OPINIONS COUNT!
REGISTER TO WIN A \$5,000 LOWE'S GIFT CARD!
REGISTRESE PARA GANAR UNA TARJETA DE REGALO LOWE'S!
REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
WITHIN ONE WEEK AT: www.lowes.com/survey
YOUR I.D.# 05276 2551 110
NO PURCHASE NECESSARY TO ENTER OR WIN.
VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER.
OFFICIAL RULES & WINNERS AT: www.lowes.com/survey

STORE: 2551 TERMINAL: 05 04/19/12 17:55:57

3/7/2012

Noted:

\$10.79

60217626.1

AIRPORT PHILLIPS 66
150 RAINBOW ROAD
EAST GRANBY, CT. 06026
(860)653-0751

NEW ENGLAND PETROLEU
150 RAINBOW ROAD
EAST GRANBY CT
00010061943

03/07/2012 2:47:31 PM
Register: 1 Trans #: 5880 Op ID: 324
Your cashier: CORY

LIPTON 16 OZ (041000099907)	\$1.79	99
ice (999999)	\$2.25	99
ice (999999)	\$2.25	99
ice (999999)	\$2.25	99
ice (999999)	\$2.25	99

Subtotal = \$10.79
Tax = \$0.00

Total = \$10.79

Change Due = \$0.00

Credit \$10.79

VVVV VVVVVV

3/10/12
\$45.36

60139731.0700

gas

WELCOME TO SUNOCO

SUNOCO
80 CHELMSFORD STREET
CHELMSFORD, MA 01824
DLR#: H325652185001

03/20/12 17:57:05

Pump#: 3 /Self
Product: Regular
Gallons 12.004
\$/Gal \$ 3.779
Fuel Sale \$ 45.36
Total Sale \$ 45.36

XXXXXXXXXXXX1007
AMX

Trans# 388183
Approval# 591150

955524s1936c3

THANK YOU FOR
YOUR BUSINESS

3/8/12

\$30.00

gas

60217626.1

Transco Mobil Mart
1093 Transco Road
Waltham, MA 02451
781-893-8500

Sale
#AMEX XXXXX1027
Auth. # 522148
Inv. # 142523
9744348
Date 03/08/12 27:35
CAR INC
WALTHAM, MA
Pump # 11 Regular
Gallons 7.773
Price/Gal \$ 3.858
Fuel Sale \$ 30.00

Transco Mobil Mart
1093 Transco Road
Waltham, MA 02451
781-893-8500

EXP1753439

Mileage rate changed from .555 to .51

IS CONTINUED

Expense report number EXP1753439 contains policy violations. It has been authorized to display "Display P" for approval.

Expense Report EXP1753439

If you have a printer, please print this report to include all required receipts. Use your Internet Explorer to view 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.

*Scan the "Expense Lines" and "Expense Allocation" tab pages and attach to the report.

*Print and sign the Expense Report worksheet if you need the printed report.

*Place receipts and the signed report in an envelope, and send to Accounts Payable along with the completed check (check enclosed by your company).

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 receipt.

If your manager does not take action within 7 days the expense report will be resubmitted to your manager for approval. To view the status and current approval for your expense report, please visit the Expense homepage and view the information under the "Track Submitted Expense Report" region.

General Information

Employee Name: Clement, John (20743)
 Expense Class: 07-000-0001 - 25-APR-2012
 Cost Center (CC): 000
 Detailed Business Purpose: Field expenses
 Approver: Marking, Timothy S.
 Receipts Status: Required

Report Submit Date: 27-APR-2012
 Amount: 95.69
 Report Total: 327.83 USD
 Reimbursed Amount: 132.63 USD

ESCLATE

ACCOMPLISH

I certify the claimed expenses are accurate and receipts are attached and proper business expenses incurred on behalf of ACCOM, and are in accordance with ACCOM travel & expense policies.

Expense Lines Expense Allocation Weekly Summary Approval Notes [X]

Business Expenses

Credit Card Expenses

Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachment Details	Sub-Amount	Country	Client's Name	Client's Title	Organization Name	Business Purpose
18-Apr-2012	60.44	USD OFF-Hours Costs & Misc.	Gas	OLUP OLATO PARTNERSHIP	✓		+	60.44					
20-Apr-2012	37.34	USD MISC-Miscellaneous	Field related	CONNECTICUT ONE PHARMACY	✓		+	37.34					
20-Apr-2012	7.38	USD MISC-Miscellaneous	Field related	CONNECTICUT ONE PHARMACY	✓		+	7.38					
21-Apr-2012	43.73	USD OFF-Hours Costs & Misc.	Gas	AL PRINCE ENERGY CONSULT	✓		+	43.73					
24-Apr-2012	75.57	USD OFF-Hours Costs & Misc.	Gas	OLUP OLATO PARTNERSHIP	✓		+	75.57					
							+	Total	234.94				

Cash Expenses

Voucher Date	Receipt Amount	Expense Type	Justification	Merchant Name	Receipt Required	Receipt Missing	Attachment Details	Sub-Amount	Country	Client's Name	Client's Title	Organization Name	Business Purpose
07-Mar-2012	3.23	USD TRA-Travel All Other	info				+	3.23					
							+	45 Miles					
20-Mar-2012	1.50	USD TRA-Travel All Other	info				+	1.50					
24-Mar-2012	1.50	USD TRA-Travel All Other	info				+	1.50					
04-Apr-2012	7.28	USD TRA-Travel All Other	info/for leg				+	7.28					
							+	65 Miles					
06-Apr-2012	0.50	USD TRA-Travel All Other	info				+	0.50					
18-Apr-2012	1.28	USD TRA-Travel All Other	info				+	1.28					
25-Apr-2012	1.28	USD TRA-Travel All Other	info				+	1.28					
							+	Total	102.88				

Expense Lines Expense Allocation Weekly Summary Approval Notes [X]

Corporate Credit/Debit Card Expenses 234.94
 Cash and Other Business Expenses 102.88
 Expense Report Total 337.83 USD
 Company Paying to Credit Card Issuer 234.94 USD
 Reimbursed to You 92.89 USD
 Corporate Card Personal Expenses 4.00
 Corporate Card Debit Card Personal Expenses 2.08

Tolls

60139731.0700 (2)

3/20/12

\$0.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Ramp
LANE N1 ATTENDANT 78292
03/20/2012 07:11:51
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Ramp
LANE S1 ATTENDANT 86117
03/20/2012 17:11:18
Class 1 \$0.75 US Cash

\$0.75

Don't forget

60139731.0700

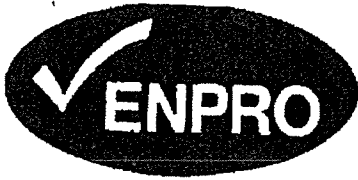
3/21/2012

\$0.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Ramp
LANE S1 ATTENDANT 86198
03/21/2012 11:07:49
Class 1 \$0.75 US Cash

\$0.75

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Ramp
LANE N1 ATTENDANT 76798
03/21/2012 08:37:04
Class 1 \$0.75 US Cash



ENPRO Services, Inc.

AECOM #: 41001

Massachusetts 01950

Project #: 6013 9731

) 465-2050

Task #: 750

ICE

04167-12

Expenditure Type: CONTRACTOR

1:

May 1, 2012

PO # (if applicable): 32718 ACM

PO Line # (if applicable):

NO.

1085-12

Amount: 1474.88

CHASE
ER NO.

Date Approved: 5/8/12

Approval Signature: [Signature]

32718 ACM

Approver's Employee #: 648678

FACT

Approver's Phone #: 978.965.2311

Pay When Paid: Yes ☐ No ☒

M/9130

Mark McCabe
Senior Project Manager

AECOM
250 Apollo Drive
Chelmsford, MA 0

TERMS: Payment due upon receipt. An interest charge of 1 1/2% per month (18% per annum) will be charged on all invoices over 30 days. 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.

DESCRIPTION						AMOUNT
Project Location: Exeter Housing Authority 277 Water Street Exeter, NH 03833-1859						
SERVICES PROVIDED: April 2012						
RENTAL SERVICES:						
Frac Tank						
	4/1/12 - 4/30/12	30.00	DAY	@	45.00	\$1,350.00
9.25% Energy - Insurance - Security (EIS) Recovery Fee Net of Fees and Taxes:						\$124.88
VISA / MASTERCARD / AMERICAN EXPRESS ACCEPTED FOR INVOICE PAYMENTS CREDIT CARD PROCESSING FEE MAY APPLY						
PROJECT PENDING: Confined Space Entry Cleaning						
APPROVED BY: <u>kpc</u>						
ENPRO Appreciates Your Business						

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.

TOTAL

\$1,474.88

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141

(617) 621-6500

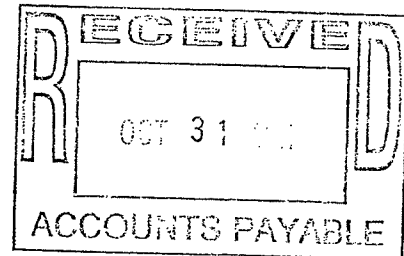
EIN: 04-2988950

October 17, 2011

Unitil Service Corp.
Attn: Tom Gatherum Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 97623 / 1383-5043

In Reference To: EXETERNHENV



Professional Services

			<u>Hours</u>	<u>Amount</u>
9/26/2011	CMG	Review agreement with Exeter. Email with M McCabe re same. Telephone conference with McCabe re same. Email to APK re same	0.50	162.50
9/27/2011	CMG	Telephone conference with client and M McCabe re changes to protocols in agreement with Exeter. Conference with APK re same. Review of Agreement. Conference with client re same	0.70	227.50
9/27/2011	APK	Conference with CMG re: additional dewatering, conference call [1].	0.10	45.00
9/28/2011	CMG	Email with M McCabe re email to Exeter	0.20	65.00
9/29/2011	CMG	Telephone conference with M McCabe re edits to letter to Exeter, technical specifications for same. Edit same. Circulate draft letter to M McCabe	0.90	292.50
		Sub-total:	2.40	792.50

Sub-total Fees: 792.50

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	2.30	325.00	747.50
Arthur P. Kreiger	0.10	450.00	45.00

Payments

3/16/2011	Payment	Ck # 88032	2,005.00
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Reg 84961

Anderson & Kreiger LLP

Page: 2

4/4/2011

Payment

Ck # 88237

227.50

Sub-total Payments: 2,232.50

Total Current Billing: 792.50

Previous Balance Due: 0.00

Total Now Due: 792.50

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK TR
10/24/11
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

November 8, 2011

Unitil Service Corp.
Attn: Tom Gatherum Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 98094 / 1383-5043

In Reference To: EXETERNHENV

Professional Services			Hours	Amount
10/1/2011	CMG	Draft and edit letter to Exeter re changes in scope of work on sewer improvement project, waste water impacts of same. Email to client re same.	0.90	292.50
10/2/2011	CMG	Series of emails with client and M McCabe re letter to Exeter concerning groundwater. Review of edits to same.	0.20	65.00
10/3/2011	CMG	Email with M McCabe re edits to letter to Exeter	0.10	32.50
10/3/2011	APK	Review and revise CMG email draft proposal to Town re: additional groundwater [.3].	0.30	135.00
10/4/2011	CMG	Conference with APK re letter to Exeter	0.30	97.50
10/4/2011	APK	Conference with CMG re: same [.3].	0.30	135.00
10/5/2011	CMG	Email with M McCabe re utility work at job site	0.10	32.50
10/7/2011	CMG	Edit letter to Town re dewatering system. Conference and email with APK re same. Circulate draft to client	1.20	390.00
10/7/2011	APK	Review revised letter re: dewatering agreement [.3]. Conference with CMG re: same [.2].	0.50	225.00
10/10/2011	CMG	Email with M McCabe re edits to letter to Exeter	0.10	32.50
10/11/2011	CMG	Edit and finalize letter to Exeter. Send same	0.50	162.50
10/13/2011	CMG	Email from M McCabe re proposed testing protocol at site. Email with M McCabe and T Gatherum re same. Conference with APK re same	0.40	130.00
10/13/2011	APK	Email from McCabe re: groundwater handling, conference w/ CMG re: same [.2].	0.20	90.00

10/24/2011	CMG	Telephone conference with Tom Gatherum re Exeter agreement. Email with M McCabe re same	0.50	162.50
10/26/2011	CMG	Conference with RL re permits available to town. Email and conference with APK re progress of negotiations, permits. Email to RL and GEO re same. Email with M McCabe re same	1.40	455.00
10/26/2011	RL	Email from CMG re question re discharge of dewatering effluent. Research and conference with CMG re same. Email to CMG re findings and recommendations. Emails from and to CMG re update from consultant.	2.60	572.00
10/27/2011	CMG	Edit email to M McCabe re permitting, and send same	0.40	130.00
10/28/2011	CMG	Email from M McCabe re draft permit proposal	0.10	32.50
10/30/2011	APK	Email from CMG, RL, McCabe re: discharge to POTW [2].	0.20	90.00
Sub-total:			10.30	<u>3,262.00</u>

Sub-total Fees: 3,262.00**Attorney/Paralegal Summary**

Name	Hours	Rate	Amount
Christine M. Griffin	6.20	325.00	2,015.00
Arthur P. Kreiger	1.50	450.00	675.00
Rebekah Lacey	2.60	220.00	572.00

Total Current Billing: 3,262.00Previous Balance Due: 792.50Total Now Due: 4,054.50

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

30-40-00-00-182-22-00
 AC R
 12/21/11
 NU-NH

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141

(617) 621-6500

EIN: 04-2988950

December 6, 2011

Unitil Service Corp.
Attn: Tom Gatherum Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 98432 / 1383-5043

In Reference To: EXETERNHENV

Professional Services			<u>Hours</u>	<u>Amount</u>
11/2/2011	CMG	Telephone conference with Mark McCabe re permitting issues.	0.50	162.50
11/3/2011	CMG	Emails with M McCabe re status of permit. Email from Town re same.	0.30	97.50
11/4/2011	CMG	Email with Town re permit. Email from client re same.	0.20	65.00
11/6/2011	CMG	Review of letter from Town re permits. Email with T Gatherum re same	0.20	65.00
11/7/2011	CMG	Conference with RL re permit proposal from Town. Review of agreement and permit proposal	0.50	162.50
11/7/2011	RL	Emails from and to CMG re draft discharge permit from Town. Review draft permit and associated documents. Conference with CMG re same and next steps. Review Town/Unitil agreement re sewer construction	1.90	418.00
11/8/2011	CMG	Email with RL re how to structure permits	0.20	65.00
11/8/2011	RL	Review draft permit. Review NHDES indirect discharger requirements. Conference with CMG re draft permit. Voice mail message to M. McCabe re same.	1.40	308.00
11/9/2011	CMG	Conference with RL re permitting issues	0.20	65.00
11/9/2011	RL	Telephone conference with M. McCabe re draft permit from Town. Conference with CMG re same. Research local limits provisions for cyanide	2.00	440.00
11/10/2011	CMG	Email with RL re permitting of Exeter waste water	0.10	32.50

11/10/2011	RL	Research cyanide pretreatment regulations. Email to M. McCabe re same. Emails to and from CMG re same and response to Town.	1.30	286.00
11/11/2011	CMG	Email from RL and M McCabe re permitting issues	0.20	65.00
11/11/2011	RL	Emails from M. McCabe re pretreatment limits for cyanide. Research same. Emails to and from M. McCabe re same and response to Town	3.90	858.00
11/13/2011	RL	Emails from and to M. McCabe re response to Town's draft permit	0.80	176.00
11/14/2011	CMG	Conference with RL re response to permit proposal from Town. Review of same. Email with T Gatherum re same. Email from M McCabe re same	1:10	357.50
11/14/2011	RL	Emails from M. McCabe and M. Jeffers re response to Town's draft permit. Revise bullet points for response to Town. Email to and conference with CMG re same	1.90	418.00
11/15/2011	CMG	Email from RL re Town permit proposal. Email from T Gatherum and M McCabe re same. Conference with RL re same	0.40	130.00
11/15/2011	RL	Revise bullets for response to Town. Emails to and from T. Gatherum and M. McCabe re same. Conference with CMG re same	0.70	154.00
11/16/2011	CMG	Email from McCabe re permitting. Email with RL re letter to Town. Review of same. Email from APK re same. Conference with RL re same	0.60	195.00
11/16/2011	APK	Review and revise letter to Town re: amendment w/ RL [.5].	0.50	225.00
11/16/2011	RL	Draft letter to Town re draft permit. Conference with CMG and APK re same. Revise and send letter.	2.30	506.00
11/17/2011	CMG	Email with RL and M McCabe re removal of collected waste water	0.20	65.00
11/17/2011	RL	Emails from and to M. McCabe re disposal of frac tank contents from EHA excavation dewatering.	0.20	44.00
11/18/2011	CMG	Email with M McCabe and T Gatherum re removal of waste water from site	0.20	65.00
11/18/2011	RL	Emails from and to M. McCabe re response to Town.	0.20	44.00
Sub-total:			22.00	5,469.50

Sub-total Fees: 5,469.50

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	4.90	325.00	1,592.50

Anderson & Kreiger LLP

Page: 3

Arthur P. Kreiger	0.50	450.00	225.00
Rebekah Lacey	16.60	220.00	3,652.00

Additional Charges

Amount

Printing

33.60

Sub-total Expenses: 33.60

Payments

11/15/2011 Payment Ck# 91340

792.50

Sub-total Payments: 792.50

Total Current Billing: 5,503.10

Previous Balance Due: 3,262.00

Total Now Due: -8,765.10

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK 7/2
12/13/11
NU-NH
30-40-00-00-180-29-00

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141

(617) 621-6500

EIN: 04-2988950

February 6, 2012

Unitil Service Corp.
Attn: Tom Gatherum Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 98986 / 1383-5043

In Reference To: EXETERNHENV

Professional Services			Hours	Amount
1/18/2012	CMG	Email with M McCabe and T Gatherum re status of environmental issues. Review email from M McCabe to Exeter re same	0.30	97.50
1/19/2012	CMG	Draft response to Unitil audit letter. Email with APK re same.	0.80	260.00
1/19/2012	APK	Conference with CMG re: auditors letter [1]. Review and revise same [2].	0.30	135.00
1/22/2012	CMG	Email from C Melendy re Exeter DPW project, upcoming meeting	0.10	32.50
1/23/2012	CMG	Review response to audit letter. Conference with APK re same. Email from M McCabe re upcoming meeting with Exeter	0.40	130.00
1/24/2012	CMG	Review email between engineers re water management at Exeter construction site. Email with M McCabe and T Gatherum re same.	0.20	65.00
1/27/2012	CMG	Email from Vlasich re upcoming meeting in Exeter	0.20	65.00
1/30/2012	CMG	Email with RL, APK and M McCabe re upcoming meeting with Exeter	0.20	65.00
1/31/2012	CMG	Conference with RL re meeting with Exeter, terms of agreement. Review of email re same	0.50	162.50
1/31/2012	RL	Emails from and to and conference with CMG re meeting with Town. Telephone conference with M. McCabe re same. Review documents. Conference with CMG re same. Email to and telephone conference with T. Gatherum re original agreement with Town. Emails from and to	3.20	704.00

T. Gatherum re CD of documents

Sub-total: 6.20 1,716.50Sub-total Fees: 1,716.50**Attorney/Paralegal Summary**

Name	Hours	Rate	Amount
Christine M. Griffin	2.70	325.00	877.50
Arthur P. Kreiger	0.30	450.00	135.00
Rebekah Lacey	3.20	220.00	704.00

Additional Charges

Printing

Amount

6.48

Sub-total Expenses: 6.48Total Current Billing: 1,722.98Previous Balance Due: 684.50Total Now Due: 2,407.48

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK R
2/8/12
NU-NH
30-40-00-00-482-29-00

Northern Utilities, Inc.

Checking Account: 30-CHECK

Check Number: 91664

Vendor Number: AECOM

Invoice Number	Date	Gross Amount	Discount	Net Amount
Environmental consulting 37180040	11/07/11	6,618.81		6,618.81
Total		6,618.81		6,618.81



Unitil

Northern Utilities, Inc.

6 Liberty Lane West
Hampton, NH 03842-1720
603 772-0775

THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATERMARK-HOLD AT ANGLE TO VIEW

BANK OF AMERICA

SOUTH PORTLAND, ME

52-153

112

Date	Check Number
12/08/2011	91664

Check Amount
*****\$6,618.81

VOID AFTER 90 DAYS

Pay * THIS IS NOT A CHECK * VOID * THIS IS NOT A CHECK * VOID *
To The
Order Of

AECOM
1178 PAYSOPHERE CIR
CHICAGO, IL 60674

*** NON-NEGOTIABLE ***

Authorized Signature

*** COPY * NON-NEGOTIABLE * COPY * NON-NEGOTIABLE * COPY ***



Batch: 302806984UPS
Requisition: 86499
Invoice: 37180040
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:

12/2/2011

Requisitioner:

Thomas Gatherum

Line Qty Description		Tax	Acct Num	Allocation	A-W-C	Dist. Amount	Unit	Sub
1	1 Environmental consulting	N	304000001822900			\$6,618.81	EA	\$6,618.81
Invoice Total:								\$6,618.81

Invoice Number: 37180040 **Invoice Amount:** \$6,618.81

Releasing Group: N/A **Receiving Group:** N/A

Approvals: 1 - David Chong 12/2/2011

AP Notes:	
Vouchered by:	<i>[Signature]</i>
Return Check to:	Payee
Voucher Month:	<i>Dec</i>

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 028009593
SWIFT CODE BOFAUS3N



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-NOV-11
Invoice Number: 37180040

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 : 24-SEP-11 to 28-OCT-11

Project Name : 13046001 EXETER SEDIMENT INVESTIGATION

Task Number : 0400

Task Name : REPORTING

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
Warren, Laura A	P16	28-OCT-11	1.00	135.00	135.00	
Total Labor Bill Rate					1.00	135.00
Task Total : REPORTING						135.00

Task Number : 0700

Task Name : ON SITE REPRESENT.

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
McCabe, Mark M	P20	14-OCT-11	16.00	190.00	3,040.00	
McCabe, Mark M	P20	28-OCT-11	2.00	190.00	380.00	
McCarthy, Ryan S	P16	14-OCT-11	5.50	135.00	742.50	
Total Labor Bill Rate					23.50	4,162.50

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multplier	Billed Amt
Miscellaneous - Allowable	McCarthy, Ryan S	14-OCT-11	EXP1452118	16.73	1.0800	18.99
Total Reimbursable					16.73	18.99
Task Total : ON SITE REPRESENT.						4,179.49

Task Number : 0750

Task Name : MGP RESID. MGMT.

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt	
Harrison, Theresa A (Terri)	P11	14-OCT-11	1.00	92.50	92.50	
Total Labor Bill Rate					1.00	92.50

Task Total : MGP RESID. MGMT.

92.50

Task Number : 0900

Task Name : MEETINGS & PROJ.MGMT

Labor Bill Rate					
<u>Employee Name/Title</u>	<u>Title/Expenditure</u>	<u>Date</u>	<u>Hours</u>	<u>Bill Rate</u>	<u>Billed Amt</u>
Harrison, Theresa A (Term)	P11	28-OCT-11	0.25	92.60	23.13
McCabe, Mark M	P20	30-SEP-11	5.00	180.00	950.00
McCabe, Mark M	P20	07-OCT-11	4.00	180.00	760.00
Rodriguez, Deanna L	P13	30-SEP-11	0.50	105.00	52.50
Rodriguez, Deanna L	P13	07-OCT-11	0.25	105.00	26.25
Rodriguez, Deanna L	P13	21-OCT-11	0.25	105.00	26.25
Total Labor Bill Rate			10.25		1,838.13
Task Total : MEETINGS & PROJ.MGMT					1,838.13

Lump Sum		
<u>Description</u>		<u>Billed Amt</u>
Computer/Telecomm/Copier @ 6% Labor per Contract		373.69
Total Lump Sum		373.69
Project Total : 13046001 EXETER SEDIMENT INVESTIGATION		6,818.81

3040-00-00-187-29-00

Expense Report EXP1452116

Confirmation

Expense report number EXP1452116 for 67.37 has been submitted to Hampton, Caroline P for approval.

Expense Report EXP1452116

Tip Hint: Print in landscape format to indicate all displayed information. Use your browser Back button to exit the previous page view.

Submission Instructions

To complete the expense report submission process, you must:
"Send the Expense Lines Tab and Expense Allocations Tab pages need to be printed."
"Print and sign the Expense Worksheet (if you used the Excel Import method)."
"Place this page and the original receipts in an internal envelope, and send to Accounts Payable and send to Accounts Payable via email or fax."

Your manager (or specified approver) will be notified requesting approval for the 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 receipt.

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

General Information

Name: Locant, Ryan S (44137)
Expense Date: 13-OCT-2011 - 14-OCT-2011
Cost Center (DEPT): 5227
Detailed Business Purpose: project expenses
Receipts Status: Required
Approval: Approved, Caroline P

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 policy.

Expense Lines Expense Allocations Weekly Summary Approval Notes (0)

Date	Amount	Receipt Type	Merchant Name	Receipt #	Receipt Missing	Attachments	Reimbursable Amount (USD)	Guest's Organization Business Purpose
13-Oct-2011	8.00	TRM-Lunch	project				8.00	
14-Oct-2011	15.73	MSC-project	expenses				15.73	
13-Oct-2011	43.55	MSC-equipment	expenses				43.55	
Total							67.27	

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ACE

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

LET ARJAYS HELP WITH ALL YOUR FALL
NEEDS..DUMPSTERS, CARPET EXTRACTORS, ETC
11/14/11 11:54AM AT 557 SALE
11/14/11 11:54AM AT 557 SALE
ACE PAINT PAIL 5 GALLON 5.99 PK N
18100VC 1 EA 7.99 EA N
1/8"X100' COLORS 7.99

SUB-TOTAL: 13.98 TAX: 13.98
DISCOUNT: TOTAL: 13.98
BC AMT: \$13.98

BK CARD#: XXXXXXXXXX1002
ID: 670121024399
AUTH: 566685 AMT: 13.98
reference #:761559 Bat#0151
SWIPED
CARD TYPE:AM EXPRESS EXPR: XXXX



=>> JRNH#H61559 <<=
CUST # *2698
ACE REWARDS ID # 19773890129

ACE

THANK YOU RYAN S MCCARTHY
FOR YOUR PATRONAGE

Signature

Name: X
Acct: RYAN MCCARTHY

DATE 10/14/2011 FRI TIME 14:07

General 11.75
TOTAL 11.75
CASH 11.75
THANK YOU COME AGAIN Back
CLERK 1 509899 00002

THE SHACK THANKS YOU.

RADIO SHACK
MILFORD PLAZA SHOP CTR
RT 109 MEDWAY RD
MILFORD, MA 01757
(508) 473-3479

Last Valid Day for Return is 11/12/2011,
see back of receipt for full return policy

2800949 \$40.99
GIGA 6' USB TO SERIAL CABLE

SubTotal \$40.99
Tax 6.25% \$2.58
TOTAL \$43.55

Amex \$43.55
CHANGE \$0.00

Total Items Sold: 1

Card number: *****1002 'N
Exp Date: 11/2012
Tran # 50437372
Authorization 524197
Host Captured Y \$43.55

Store: 011128 Register: 02 Tran: 4401
Operator: ZV Sales Associate: ZV
Ticket #: 024401 10/13/2011 10:19:07 AM



011128024401001101311006

OLIVER DUNN
62 1-2 E MAIN ST
MILFORD MA 01757
508-473-7328
Terminal ID: 90736785 9902
10 12-11 10:29 AM
VISA
REF # 11.865
BATCH # 195 AUTH # 173026
CREDIT SALE
AMOUNT \$8.09
APPROVED
THANK YOU
CUSTOMER COPY

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141

(617) 621-6500

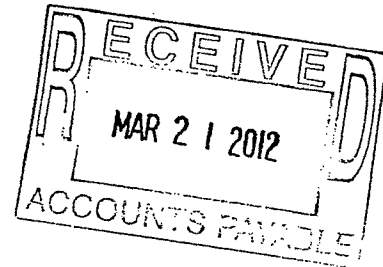
EIN: 04-2988950

March 12, 2012

Unlil Service Corp.
Attn: Tom Gatherum Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 99401 / 1383-5043

In Reference To: EXETERNHENV



Professional Services			Hours	Amount
2/1/2012	CMG	Email and conference with RL re meeting with Town of Exeter.	0.40	130.00
2/1/2012	APK	Conference with RL re: regulatory history for settlement meeting [.2]. Emails from and to same re: follow-up (URAM regulations, reports from McCabe) [.1].	0.30	135.00
2/1/2012	RL	Review background documents. Conference with APK re same and regulatory status. Research regulatory status of Exeter Gasworks site. Telephone conference with and emails from and to M. McCabe and to and from CMG and APK re same. Review AUL document. Attend meeting with Town and Underwood Engineers at Exeter DPW. Conference with APK and CMG re same.	6.40	1,408.00
2/2/2012	CMG	Email from and conference with RL re meeting with Exeter	0.30	97.50
2/2/2012	RL	Email to T. Gatherum re summary of Exeter meeting	0.50	110.00
2/3/2012	RL	Conference with CMG re drafting revised agreement. Review revised draft wastewater discharge permit. Telephone conference with M. McCabe re same and other followup from meeting with Town	1.20	264.00
2/6/2012	CMG	Emails from M McCabe and RL re possible solutions to Exeter construction issues, setting up meeting	0.20	65.00
2/6/2012	APK	Email from McCabe re: issues and recommendations [.1].	0.10	45.00

2/6/2012	RL	Emails from and to M. McCabe re revised agreement with Town and Underwood testing	0.60	132.00
2/7/2012	CMG	Email from RL, T Gatherum and M McCabe setting up meeting	0.10	32.50
2/7/2012	RL	Emails from and to TG, MM and CMG re meeting	0.20	44.00
2/9/2012	RL	Review NU documents on CD provided by T. Gatherum	1.10	242.00
2/10/2012	APK	Conference with RL re: draft dewatering amendment [.1].	0.10	45.00
2/10/2012	RL	Review draft and final versions of July 21, 2011 agreement between NU and Town. Telephone conference with M. McCabe re same, discussions with Underwood, and Monday meeting. Conference with APK re same. Draft revised agreement	2.90	638.00
2/12/2012	RL	Draft revised agreement. Email to CMG and APK re same	1.30	286.00
2/13/2012	CMG	Conference with APK re response to Exeter demands. Conference with RL re same. Conference with APK and RL re same. Prepare for meeting with clients. Meet with RL, T Gateherum, Mark McCabe re same. Follow up to same	2.80	910.00
2/13/2012	APK	Review revised Agreement re: dewatering [.5]. Conference with CMG, RL re: same, meeting w/ Unittel [.5]. Conference with TG, McCabe re: same [.1].	1.10	495.00
2/13/2012	RL	Conference with APK re agreement with Town. Edit proposed revisions to same. Conference with CMG and APK re same. Conference with M. McCabe and T. Gatherum re same	3.10	682.00
2/14/2012	CMG	Review and edit draft agreement with Exeter. Conferences with RL re same. Review email from RL, M McCabe re same	0.70	227.50
2/14/2012	RL	Revise proposed agreement with Town. Conference with CMG re same and Email from M. McCabe re pumping test. Emails to M. McCabe and T. Gatherum re same.	2.90	638.00
2/15/2012	APK	Review Agreement edits [.3].	0.30	135.00
2/16/2012	CMG	Email from M McCabe re edits to draft agreement with Exeter.	0.10	32.50
2/16/2012	APK	Conference with CMG re: APK edits [.2].	0.20	90.00
2/17/2012	CMG	Conference with APK re edits to Unittel Agreement. Review of same	0.30	97.50
2/22/2012	CMG	Email from client re pumping protocols in Exeter	0.20	65.00
2/23/2012	CMG	Email from Town of Exeter re pump testing	0.10	32.50
2/24/2012	CMG	Email with M McCabe re testing at Exeter site, draft agreement	0.20	65.00

Sub-total: 27.70 7,144.00Sub-total Fees: 7,144.00**Attorney/Paralegal Summary**

Name	Hours	Rate	Amount
Christine M. Griffin	5.40	325.00	1,755.00
Arthur P. Kreiger	2.10	450.00	945.00
Rebekah Lacey	20.20	220.00	4,444.00

Additional Charges

	Amount
Photocopy in-house	7.68
Printing	15.12
2/1/2012 Mileage Rebekah Lacey	58.28
Sub-total Expenses:	<u>81.08</u>

Payments

2/27/2012	Payment	Ck# 92484	1,722.98
Sub-total Payments:			<u>1,722.98</u>

Total Current Billing: 7,225.08Previous Balance Due: 684.50Total Now Due: 7,909.58

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK PR
3/20/12
NU-NH
3040-06-00 - 182-29-00

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141

(617) 621-6500

EIN: 04-2988950

April 12, 2012

Unitil Service Corp.
Attn: Tom Gatherum Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 99797 / 1383-5043

In Reference To: EXETERNHENV

*Former MGP SITE
in EXETER*

Professional Services			Hours	Amount
3/1/2012	CMG	Email from M McCabe re pump test at site. Email with RL re same	0.20	65.00
3/1/2012	RL	Review emails from M. McCabe re well testing. Emails to and from CMG re same. Email to M. McCabe re same and revised agreement with Town	0.40	88.00
3/2/2012	CMG	Email from M McCabe and RL re pump testing	0.10	32.50
3/2/2012	RL	Email from M. McCabe re comments on revisions to agreement with Town. Review same. Email to M. McCabe re same	0.50	110.00
3/6/2012	RL	Telephone conference with M. McCabe re well testing. Review draft scope and Town sewer regulations. Conference with CMG re management of water from well testing. Telephone conference with M. McCabe re same	1.20	264.00
3/8/2012	CMG	Email from M McCabe re slug test at Exeter site. Email from RL re same	0.30	97.50
3/8/2012	RL	Emails from and to M. McCabe re well pumping test	0.20	44.00
3/9/2012	RL	Conference with CMG re edits to proposed revisions to agreement with Town	0.20	44.00
3/13/2012	CMG	Email from M McCabe and R Lacey re pump tests and scope of same. Review of draft agreement re same. Email with RL re same	0.50	162.50
3/13/2012	RL	Email from M. McCabe re revised draft SOW for well pumping test. Prepare edits to same and emails to and from CMG re same. Revise edits.	1.10	242.00

2012

		Emails to and from M. McCabe re same		
3/14/2012	CMG	Email from RL and M McCabe re changes to draft agreement for pump test	0.20	65.00
3/14/2012	RL	Emails from and to M. McCabe re revised scope for well pumping test	0.20	44.00
3/16/2012	CMG	Conference with RL re testing in Exeter. Email from RL re same. Email from Town re same	0.50	162.50
3/16/2012	RL	Emails from and to M. McCabe re Town response to well pumping SOW. Conference with CMG re same. Emails to and from P. Vlasich re same. Telephone conference with M. McCabe and emails to and from T. Gatherum re same	1.20	264.00
3/20/2012	CMG	Telephone conference with client re audit letter, and email with APK re same. Email with M McCabe and RL re pump test. Review email to Town re updated agreement	0.70	227.50
3/20/2012	RL	Edit proposed revisions to agreement with Town. Email to CMG re same. Emails from and to M. McCabe re results of pump test. Emails from and to CMG re audit letter	1.50	330.00
3/21/2012	CMG	Conference with RL re amendments to agreement. Review email re same	0.30	97.50
3/21/2012	RL	Emails from and to CMG re revised agreement and draft email to Town. Emails to and from M. McCabe re same. Revise agreement and draft email and email to CMG re same	0.70	154.00
3/22/2012	CMG	Draft and send Unitil audit letter. Conference with SPL re same	0.70	227.50
3/26/2012	CMG	Review and edit draft agreement with Town governing MGP contamination. Conference with RL re same	0.90	292.50
3/26/2012	RL	Emails from and to M. McCabe re revised agreement with Town. Conference with CMG re same. Finalize proposed revisions to agreement. Email to Town re same. Email to T. Gatherum re same	0.60	132.00
3/27/2012	RL	Email from M. McCabe re draft memorandum to Town re pumping test. Review memorandum. Telephone conference with M. McCabe re same. Edit memorandum. Email to M. McCabe re same	2.10	462.00
3/29/2012	RL	Emails from and to and telephone conference with M. McCabe re pump test results and communications with Town	0.30	66.00

Sub-total: 14.60 3,674.00

Sub-total Fees: 3,674.00

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	4.40	325.00	1,430.00
Rebekah Lacey	10.20	220.00	2,244.00

Additional Charges

	Amount
3/1/2012 Printing	11.28
Tolls Rebekah Lacey	4.50
Sub-total Expenses:	15.78

Payments

4/6/2012	Payment	WT 4/6/2012	7,225.08
Sub-total Payments:			7,225.08

Total Current Billing:	3,689.78
Previous Balance Due:	684.50
Total Now Due:	4,374.28

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

OK EG
4/16/12
NU-NH
30-40-0000-182-0000



Batch: 302807667UPS
Requisition: 93032
Invoice: 99797
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:

ANDERSON & KREIGER LLP
ATTORNEYS AT LAW
ONE CANAL PARK
SUITE 200
CAMBRIDGE, MA 02141-1764

Order Date:

4/18/2012

Requisitioner:

Patricia Fallon

Line Qty Description		Tax	Acct Num	Allocation	A-W-C	Dist. Amount	Unit	Sub
1	1		Former MGP site in Exeter	N	304000002420401			
						\$3,689.78	EA	\$3,689.78
Invoice Total:								\$3,689.78

Invoice Number: 99797 **Invoice Amount:** \$3,689.78

Releasing Group: N/A **Receiving Group:** N/A

Approvals:

1 - Thomas Gatherum 4/18/2012
2 - Leigh Willett 4/27/2012

AP Notes:	
Vouchered by:	<i>[Signature]</i>
Return Check to:	Payee
Voucher Month:	<i>Apr</i>

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141

(617) 621-6500

EIN: 04-2988950

May 10, 2012

Unitil Service Corp.
Attn: Tom Gatherum Loss Control Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 100148 / 1383-5043

In Reference To: EXETERNHENV

MAY 21 2012

Professional Services

			Hours	Amount
4/3/2012	CMG	Email with M McCabe and RL re status of project in exeter	0.30	97.50
4/3/2012	RL	Emails from and to M. McCabe re calls from JAMCO, Baker Tank and Exeter Housing Authority.	0.20	44.00
4/19/2012	CMG	Email from RL re progress in Exeter project	0.10	32.50
4/19/2012	RL	Emails from and to M. McCabe re status of sewer project and revised agreement	0.20	44.00
4/20/2012	CMG	Email from RL re Town forwarding agreement to town counsel	0.20	65.00
4/20/2012	RL	Voice mail message from and email to M. McCabe re Town review of draft revised agreement	0.20	44.00
4/23/2012	CMG	Review of letter from Town re wellpoint water. Conference with RL re same	0.50	162.50
4/23/2012	RL	Email from P. Vlasich re agreement with Town. Conference with CMG re same	0.50	110.00
4/24/2012	CMG	Email from Exeter re water management. Email and conference with RL re same, response. Edit draft of same. Email from M McCabe re same	0.80	260.00
4/24/2012	RL	Emails from and to T. Gatherum and M. McCabe re letter from P. Vlasich. Draft response letter. Conference with CMG re same. Revise letter and email to M. McCabe for review	2.00	440.00
4/25/2012	CMG	Conference with RL re edits to draft letter to Exeter. Review of email re same. Review and edit letter	0.40	130.00

94261

Anderson & Kreiger LLP

Page: 2

4/25/2012	APK	Review and revise letter to Town, conference with RL re: dewatering effluent [.2].	0.20	90.00
4/25/2012	RL	Emails from M. McCabe re draft letter to Town. Conference with CMG re same and revise letter. Email to M. McCabe re same. Emails to and from T. Gatherum and conference with A. Kreiger re draft letter. Finalize letter.	1.30	286.00
			Sub-total:	6.90
				<u>1,805.50</u>

Sub-total Fees: 1,805.50

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Christine M. Griffin	2.30	325.00	747.50
Arthur P. Kreiger	0.20	450.00	90.00
Rebekah Lacey	4.40	220.00	968.00

Additional Charges

Printing

Amount

Sub-total Expenses: 0.96

Payments

5/7/2012	Payment	Ck# 93052	3,689.78
			Sub-total Payments: <u>3,689.78</u>

Total Current Billing:	<u>1,806.46</u>
Previous Balance Due:	684.50
Total Now Due:	<u>2,490.96</u>

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

*OK'd
5/14/12
NW-KH*

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

ANDERSON & KREIGER LLP

One Canal Park, Suite 200
Cambridge, MA 02141

(617) 621-6500

EIN: 04-2988950

June 8, 2012

Unitil Service Corp.
Attn: Tom Gatherum Loss Control/Manager
5 McGuire Street
Concord, NH 03301-4622

Reference # 100450 / 1383-5043

In Reference To: EXETERNHENV

Professional Services

			<u>Hours</u>	<u>Amount</u>
5/22/2012	RL	Emails to and from M. McCabe re communications with Town	0.10	22.00
		Sub-total:	0.10	<u>22.00</u>

Sub-total Fees: 22.00

Attorney/Paralegal Summary

Name	Hours	Rate	Amount
Rebekah Lacey	0.10	220.00	22.00

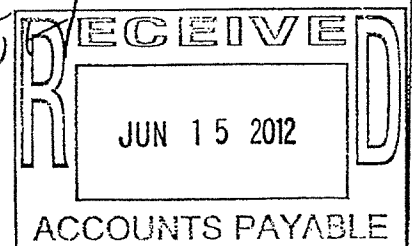
Total Current Billing: 22.00

Previous Balance Due: 2,490.96

Total Now Due: 2,512.96

PLEASE NOTE: ALL BALANCES DUE WITHIN 30 DAYS

30-40-00-00-182-29-00
NU-N



DUE IMMEDIATELY

REQ # 85844
Q# - 11/17/11

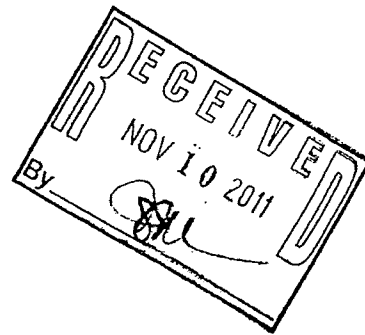
INVOICE

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: 04/01/2011 to 06/30/2011

Description	Amount
Personnel	269.11
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.

Line #

Previous Balance: -\$25.15

Payments Through 9/30/2011: \$0.00

Interest: \$0.00

Adjustments: \$0.00

Expenses Incurred For Period 04/01/2011 to 06/30/2011: \$269.11

Current Balance Due: \$243.96

INVOICE DATE: 10/20/2011

DUE DATE: 12/19/2011

If full payment is received prior to 11/19/2011 you may deduct 5% and pay only \$230.50
[Current Balance Due - .05 * Expenses Incurred]

Questions should be addressed to Kimberly Durgin. Email: Kimberly.Durgin@des.nh.gov Phone: (603) 271-2908
See other side for Terms and Conditions.

Accounting: 2011 30.40.00.00.182.29.00

Description: NH DES Oversight, Exeter, NH mmp-Outfall

Cost Recovery Detail

For: 01-APR-11 to 30-JUN-11

DES# 198401075

EXETER GAS WORKS

Total Cost **\$269.11**

Personnel

Name	Orgn	Trans Date	Task / Expense Desc	Hours	Cost	Overhead	Total Costs
WICKSON RALPH L	2514	04/22/2011	PROJECT MANAGEMENT / DEVELOPMENT	3.00	\$101.55	\$167.56	\$269.11
Total Cost for Personnel Class							\$269.11

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: 07/01/2011 to 09/30/2011

Description

Amount

No Transactions Found For This Period

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:	\$243.96
Payments Through Current Date:	\$230.50
Interest:	\$0.06
Adjustments:	\$0.00
Expenses Incurred For Period 07/01/2011 to 09/30/2011:	\$0.00
Current Balance Due:	\$13.52

INVOICE DATE: 01/20/2012

DUE DATE: 03/20/2012

If full payment is received prior to 02/19/2012 you may deduct 5% and pay only \$13.52

[Current Balance Due - .05 * Expenses Incurred]

Questions should be addressed to Kimberly Durgin. Email: Kimberly.Durgin@des.nh.gov
See other side for Terms and Conditions.

Phone: (603) 271-2908

OK'd
1/27/12
NW-WLP
30-40-01-00-182-29-00

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: 10/01/2011 to 12/31/2011

<u>Description</u>	<u>Amount</u>
Personnel	897.05
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:	\$13.52
Payments Received From 01/01/2012 To 03/31/2012 :	\$13.52
Interest:	\$0.00
Adjustments:	\$0.00
Expenses Incurred For Period 10/01/2011 To 12/31/2011 :	\$897.05
Current Balance Due:	\$897.05

INVOICE DATE: 04/18/2012

DUE DATE: 06/17/2012

If full payment is received prior to 05/18/2012 you may deduct 5% and pay only \$852.20
[Current Balance Due - .05 * Expenses Incurred]

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
4/20/12
NH
30-40000-182-29-00

Cost Recovery Detail

For: 01-OCT-11 to 31-DEC-11

DES# 198401075

EXETER GAS WORKS

Total Cost **\$897.05**

Personnel

Name	Orgn	Trans Date	Task / Expense Desc	Hours	Cost	Overhead	Total Costs
WICKSON RALPH L	2514	11/04/2011	PROJECT MANAGEMENT / DEVELOPMENT	7.50	\$253.88	\$418.90	\$672.78
WICKSON RALPH L	2514	12/16/2011	PROJECT MANAGEMENT / DEVELOPMENT	2.50	\$84.63	\$139.64	\$224.27
Total Cost for Personnel Class							\$897.05

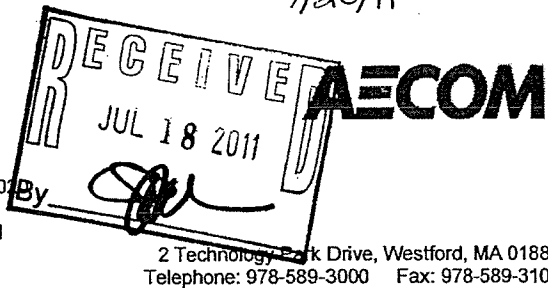
Attachment 3B
Rochester Invoices

PO 64025
OL
7/20/11

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



Federal Tax ID No.
06-0852759

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

Invoice Date: 11-JUL-11
Invoice Number: 37141076

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Bill Through Date : 28-MAY-11 to 01-JUL-11

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

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	10-JUN-11	7.00	97.50	682.50
Callahan, Colin P	P12	17-JUN-11	6.00	97.50	585.00
Kirkwood, Gemma	P13	01-JUL-11	0.50	105.00	52.50
Rodriguez, Deanna L	P13	04-MAR-11	0.25	105.00	26.25
Rodriguez, Deanna L	P13	27-MAY-11	0.50	105.00	52.50
Callahan, Colin P	P12	03-JUN-11	10.00	97.50	975.00
Gregorio, Helena	P12	10-JUN-11	0.50	97.50	48.75

Total Labor Bill Rate

24.75

2,422.50

Reimbursable						
<u>Expenditure Type</u>	<u>Employee/Vendor Name</u>	<u>Date</u>	<u>Inv Number</u>	<u>Raw Cost</u>	<u>Multiplier</u>	<u>Billed Amt</u>
Lunch	Callahan, Colin P	06-JUN-11	EXP1283192	16.19	1.0800	17.49
Meals	Callahan, Colin P	07-JUN-11	EXP1283192	5.00	1.0800	5.40
Meals	Callahan, Colin P	17-JUN-11	EXP1283155	16.19	1.0800	17.49
Miscellaneous - Allowable	Callahan, Colin P	04-MAY-11	EXP1248196	17.52	1.0800	18.92
Miscellaneous - Allowable	Callahan, Colin P	17-JUN-11	EXP1283155	12.81	1.0800	13.83
Rent - Equipment	ENTERPRISE RENT A CAR	21-JUN-11	D234794	264.96	1.0800	286.16
Supplies	Callahan, Colin P	07-JUN-11	EXP1283192	12.92	1.0000	12.92
Travel All Other	Callahan, Colin P	06-JUN-11	EXP1283192	57.00	1.0800	61.56
Travel All Other	Callahan, Colin P	17-JUN-11	EXP1283155	88.28	1.0800	95.34
Miscellaneous - Allowable	Callahan, Colin P	19-MAY-11	EXP1283192	374.00	1.0800	403.92
Rent - Equipment	ENTERPRISE RENT A CAR	13-MAY-11	D234418	188.42	1.0800	203.49
Rent - Equipment	ENTERPRISE RENT A CAR	21-JUN-11	D234794	88.32	1.0800	95.39

Total Reimbursable

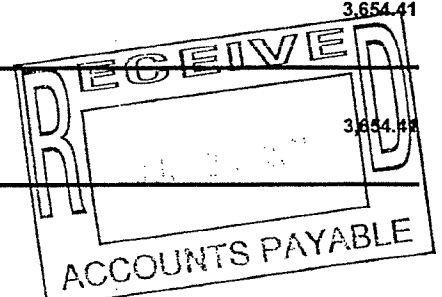
1,141.61

1,231.91

Task Total : EVALUATION ACTIVITIE

3,654.41

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM



P.O. 30.40.00.00.182.29.00
64025

Invoice Summaries

Total Current Amount :	3,654.41
Retention Amount :	0.00
Pre-Tax Amount :	3,654.41
Tax Amount :	0.00
Total Invoice Amount :	3,654.41

Billing Summaries

<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	3,654.41	102,285.96	105,940.37		
Billing Total :	3,654.41	102,285.96	105,940.37		

Outstanding Invoices

<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37141076	11-JUL-11	3,654.41
Outstanding Total :		3,654.41

AECOM PA Invoice Billing Backup - NonLabor

Page 1 of 1

Customer Name: UNITIL SERVICES CORPORATON
 Invoice Number: 37141076
 Invoice Date: 28-MAY-11 to 01-JUL-11
 Project: 60139734 13046004 2010 PHYTOREMEDIATION PROG

Task: 0100 INSTALLATION ACTIVITI

Category :	Reimbursables	Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
		Callahan, Colin P	Miscellaneous - Allowab	19-MAY-11	EXP1283192	852240251	374.00	1.080	403.92
		ENTERPRISE RENT A CAR	Rent - Equipment	13-MAY-11	D234418	852238074	188.42	1.080	203.49
		ENTERPRISE RENT A CAR	Rent - Equipment	21-JUN-11	D234794	852261660	88.32	1.080	95.39
Category Total :							650.74		702.80
Total for Task: 0100							650.74		702.80

Task: 0200 EVALUATION ACTIVITIE

Category :	Reimbursables	Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
		Callahan, Colin P	Miscellaneous - Allowab	04-MAY-11	EXP1248196	852184330	17.52	1.080	18.92
		Callahan, Colin P	Lunch	06-JUN-11	EXP1283192	852240251	16.19	1.080	17.49
		Callahan, Colin P	Travel All Other	06-JUN-11	EXP1283192	852240251	50.00	1.080	54.00
		Callahan, Colin P	Travel All Other	06-JUN-11	EXP1283192	852240251	7.00	1.080	7.56
		Callahan, Colin P	Meals	07-JUN-11	EXP1283192	852240251	5.00	1.080	5.40
		Callahan, Colin P	Supplies	07-JUN-11	EXP1283192	852240251	12.92	1.080	12.92
		Callahan, Colin P	Meals	17-JUN-11	EXP1283155	852262409	16.19	1.080	17.49
		Callahan, Colin P	Miscellaneous - Allowab	17-JUN-11	EXP1283155	852262409	12.81	1.080	13.83
		Callahan, Colin P	Travel All Other	17-JUN-11	EXP1283155	852262409	7.00	1.080	7.56
		Callahan, Colin P	Travel All Other	17-JUN-11	EXP1283155	852262409	81.28	1.080	87.78
		ENTERPRISE RENT A CAR	Rent - Equipment	21-JUN-11	D234794	852261660	264.96	1.080	286.16
Category Total :							490.87		529.11
Total for Task: 0200							490.87		529.11

Project Invoice Total: 60139734

1,141.61

1,231.91

Confirmation

Expense report number EXP1283192 for 465.11 has been submitted to Mosquera, Justin L. for approval.

Expense Report EXP1283192

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)
Expense Dates 19-MAY-2011 - 07-JUN-2011
Cost Center (DEPT) 5825
Detailed Business Purpose Data DL & Purge H20 Drop Off
Approver Mosquera, Justin L.
Receipts Status Required

Report Submit Date 16-JUN-2011
Attachments View
Report Total 465.11 USD
Reimbursement Amount 465.11 USD

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-May-2011	374.00 USD	MISC-Miscellaneous	Probe 12 Repair		✓		+		374.00					
06-Jun-2011	50.00 USD	MISC-Miscellaneous	Gas		✓		+		50.00					
06-Jun-2011	7.00 USD	MISC-Miscellaneous	Tolls				+		7.00					
06-Jun-2011	18.19 USD	MISC-Miscellaneous	Lunch				+		18.19					
06-Jun-2011	5.00 USD	MISC-Miscellaneous	Drinks				+		5.00					
	12.92 USD	MISC-	Field											

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 85086
06/06/2011 10:47:04
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 79403
06/06/2011 10:35:48
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 79555
06/06/2011 13:14:24
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S3 ATTENDANT 80753
06/06/2011 13:29:14
Class 1 \$2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 77481
06/06/2011 13:26:18
Class 1 \$0.75 US Cash

WILD HILLY'S BURGERS
12 GONIC ROAD
ROCHESTER NH 03067,
603-332-1193

Merchant ID: 66005130471601

Sale

~~XXXXXXXXXX~~7152

VISA

Entry Method: Swiped

Total:

\$ 16.19

06/06/11

12:03:30

Invt#: 000006

Appr Code: 005378

Approved: Online

Batch#: 000362

Customer Copy
THANK YOU!
COME AGAIN!

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N1 ATTENDANT 80791
06/06/2011 10:23:18
Class 1 \$2.00 US Cash



WELCOME

T033630162-001
SUNOCO 0267962900
29 CHARLES STREET
ROCHESTER NH 0386

ALWAYS THE FRESHEST QUALITY
FOR YOUR FAMILY

(800) 551-8833

DATE 06/06/11
TIME 12:00 PM
AUTH# 539544

001 02 02493357 05/07/11 10:21:59 321
COFF LOTION \$12.19 T

AHEX
ACCOUNT NUMBER
XXXX XXXXXX X1008

SUBTOTAL \$12.19
SALES TAX \$0.73

PUMP PRODUCT PPG
06 UNLD \$3.799

TOTAL \$12.92

GALLONS TOTAL
13.162 \$50.00

VISA \$12.92

A-PROVEC
A CTH SXXXXXXXXXXXXX7152
05/07/11 10:19
AUTH # C15938
LED # 6780
TERM IC: LK650X63

CHANGE \$0.00

THANK YOU
HAVE A NICE DAY

OF ITEMS: 1

THANK YOU

DYNAMAX
10808 FALLSTONE RD
HOUSTON TX 77099
800-996-7108
Merchant ID: 512178430104158
Term ID: 0403

Sale

VISA

XXXXXXXXXXXX7152

Entry Method: Manual

Approved: Online Batch#: 000006
05/19/11 15:35:27

Inv#: 00000001 Appr Code: 055248

Total:

374.00

Customer Copy

AECOM #: 41001

Project #: 60191739
Task #: 400
Expenditure Type: off-rent Equip
PO # (if applicable): -
PO Line # (if applicable): -
Amount: \$ 659.47
Date Approved: 6/14/11
Approval Signature: [Signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60139732
Task #: 0200
Expenditure Type: off-rent Equip
PO # (if applicable): -
PO Line # (if applicable): -
Amount: \$ 94.21
Date Approved: 6/14/11
Approval Signature: [Signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60137734
Task #: 0100
Expenditure Type: off-rent Equip
PO # (if applicable): -
PO Line # (if applicable): -
Amount: \$ 188.42
Date Approved: 6/14/11
Approval Signature: [Signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60137978
Task #: 905
Expenditure Type: off-rent Equip
PO # (if applicable): -
PO Line # (if applicable): -
Amount: \$ 94.21
Date Approved: 6/14/11
Approval Signature: [Signature]
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes ☐ No ☒

M09130



Rental Invoice



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Bill To:

0001037-00000 (0000) 1-7-1000000000

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

RENTAL INFORMATION

Date Out 5/27/11 10:04AM Date In 6/21/11 10:03A
Renter COLIN CALLAHAN

Additional Driver

Name
NO OTHER DRIVER PERMITTED

RENTAL VEHICLES CLAIM INFORMATION

Color License No. Claim #/Policy #/P.O. #
SILVER 839F56
Model Unit # Insured
11 S15C 7DKL4W
Date of Loss Type of Loss
Type of Car Repair Shop

Rental Agreement

D234794 - 10U8

BILLING DETAIL

Description	Rate	Amount
3 WEEKS @	357.50	1,072.50
SPECIAL @	32.50	130.00
PKGSCH		.60
VLCREC FEE		43.75
SALES TX %	6.25	77.93

SEE
2nd SHEET

AMOUNT DUE 1324.78

IMPORTANT INFORMATION

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

Remit to:

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

AMOUNT DUE 1324.78

Paid by:

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

08/23

Customer# Rental Agreement Amount GPBR
NA10F08 D234794 1324.78 10U8

AECOM #: 41001

Project #: 60191739
 Task #: 700
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$353.27
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60146715
 Task #: 1
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$88.32
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60147320
 Task #: 1
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$88.32
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60139734
 Task #: 0100
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$88.32
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60139734
 Task #: 0100
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$264.96
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60197271
 Task #: 2
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$88.32
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60156125
 Task #: 600
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$88.32
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60137973
 Task #: 905
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$176.64
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130

Project #: 60218395
 Task #: 2
 Expenditure Type: off-ret Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$88.31
 Date Approved: 6/27/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-589-3102
 Pay When Paid: Yes ☐ No ☒

M09130



Confirmation

Expense report number EXP1283155 for 117.28 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP1283155

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 interface 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 (847872)
Expense Dates 17-JUN-2011 - 17-JUN-2011
Cost Center (DEPT) 8826
Detailed Business Purpose TDP's
Approver Mosquera, Justin L.
Receipts Status Required

Report Submit Date 27-JUN-2011
Attachments View
Report Total 117.28 USD
Reimbursement Amount 117.28 USD

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 Name	Merchant	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country Name	Guest's Title	Organization Name	Business Purpose
17-Jun-2011	7.00 USD	MISC-Miscellaneous	toile				+		7.00				
17-Jun-2011	12.81 USD	MISC-Miscellaneous	fold supplies				+		12.81				
17-Jun-2011	81.28 USD	MISC-Miscellaneous	gas				+		81.28				
17-Jun-2011	16.19 USD	MISC-Miscellaneous	lunch				+		16.19				
Total									117.28				

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 86165
06/17/2011 12:16:03
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S3 ATTENDANT 77922
06/17/2011 12:39:56
Class 1 \$2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 77481
06/17/2011 09:57:09
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N4 ATTENDANT 84929
06/17/2011 09:45:00
Class 1 \$2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 86086
06/17/2011 10:08:54
Class 1 \$0.75 US Cash

06-17-11
21

12 *149
10 *699
10 *149
10 *175
10 *109

*1281

*260

*720

36-9993

12-00

WELCOME

SALES RECEIPT
57 544 920804
SHELL
110 MAIN STREET
READING MA 01867

DATE 06/17/11 9:05AM
INVOICE# 691717
AUTH# 515083
ANEX
ACCOUNT NUMBER
XXXX XXXXX X1008

PUMP PRODUCT \$/G
08 UNLD \$3.869

GALLONS FUEL TOTAL
21.007 \$ 81.28

THANK YOU
COME BACK SOON

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 77481
06/17/2011 12:27:14
Class 1 \$0.75 US Cash

WILD HILLY'S BURGERS
12 GUNIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 66085130471601

Sale

ATTENDANT 7152

Entry Method: Swiped

UTSA

Total:

16.19

06/17/11

12:06:29

Inv# 000007

Appr Code: 005628

Appr'd: Online

Batch#: 000073

Customer Copy
THANK YOU
COME AGAIN

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).

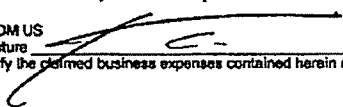
Your manager (or specified approver) will be notified requesting approval for this expense report. Upon approval, a notification will be sent to you and Accounts Payable. This expense report will be paid after it has been approved, and Accounts Payable verifies the receipts.

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, Collin P (647972)
Expense Dates 04-MAY-2011 - 12-MAY-2011
Cost Center (DEPT) 5826
Detailed Business Purpose GW Sampling & TDP Install
Approver Mosquera, Justin L
Receipts Status Required

Report Submil Date 20-MAY-2011
Attachments View
Report Total 657.01 USD
Reimbursement Amount 657.01 USD

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 Expense Amount 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 MISC-USD Miscellaneous	Ice & Drinks				+		18.30					
10-May-2011	29.69 MISC-USD Miscellaneous	Lunch for Eddie Z & C Callahan		✓		+		29.69					
10-May-2011	100.00 MISC-USD Miscellaneous	Gas		✓		+		100.00					
10-May-2011	7.00 MISC-USD Miscellaneous	Tolls				+		7.00					
11-May-2011	27.55 MISC-USD Miscellaneous	Lunch for Kris Van Naerssen & C Callahan		✓		+		27.55					

http://crpdapps.aecomnet.com/OA_HTML/OA.jsp?page=/oracle/apps/ap/oie/entry/summary/webui/ConfirmationPG&_ti=122... 5/20/2011

11-May-2011	7.00	MISC-USD	Miscellaneous	Tolls					+		7.00					
12-May-2011	387.02	MISC-USD	Miscellaneous	Field Supplies		✓			+		387.02					
12-May-2011	26.03	MISC-USD	Miscellaneous	Field Supplies		✓			+		26.03					
12-May-2011	29.90	MISC-USD	Miscellaneous	Lunch for Kris Van Naerssen & C Callahan		✓			+		29.90					
12-May-2011	7.00	MISC-USD	Miscellaneous	Tolls					+		7.00					
04-May-2011	17.52	MISC-USD	Miscellaneous	Tecnu					+		17.52					
Total											657.01					

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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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#0283216 STR#799

1 TECNU ORK/IVY 4Z 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

Contractor got
person ivy?
- Employee to provide
employee going per-
mitted at no cost to
unitil

Rental Invoice



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Bill To:

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

RENTAL INFORMATION

Date Out 5/27/11 10:04AM Date In 6/21/11 10:03A
Renter COLIN CALLAHAN

Additional Driver

Name
NO OTHER DRIVER PERMITTED

RENTAL VEHICLES CLAIM INFORMATION

Color	License No.	Claim #/Policy #/P.O. #
SILVER	839F56	
Model	Unit #	Insured
11 S15C	7DKL4W	
Date of Loss	Type of Loss	Type of Car
		Repair Shop

Rental Agreement

D234794 - 10U8

BILLING DETAIL

Description	Rate	Amount
3 WEEKS @	357.50	1,072.50
SPECIAL @	32.50	130.00
PKGSCH		.60
VLCREC FEE		43.75
SALES TX %	6.25	77.93

SEE
2nd SHEET

AMOUNT DUE 1324.78

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

Remit to:

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

AMOUNT DUE 1324.78

Paid by:

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

06/23

Customer# Rental Agreement Amount GPBR
NA10F08 D234794 1324.78 10U8

AECOM #: 41001

Project #: 60191739
Task #: 700
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$353.27
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60139734
Task #: 0200
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$264.96
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

Project #: 60218393
Task #: 2
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60146715
Task #: 1
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60197271
Task #: 2
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60147320
Task #: 1
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60156125
Task #: 600
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60139734
Task #: 0100
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60137978
Task #: 905
Expenditure Type: off-rot Equip

PO # (if applicable):
PO Line # (if applicable):
Amount: \$176.64
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

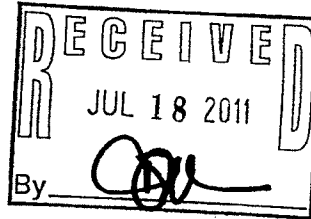


AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

July 14, 2011

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



AECOM Ref. No.: 60139734-Inv24

**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 July 1, 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 \$3,654. 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 completed installation of the Thermal Dissipation Probes (TDPs) and installed a water level data logger during this invoicing period. Data was also periodically downloaded during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in June 2011 associated with this task was \$3,654.

AECOM

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
June 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	\$37,240.71	\$3,654.41	\$40,895.12	\$2,804.88
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$65,044.87	\$0.00	\$65,044.87	\$30,955.13
Total		\$139,700.00	\$38,900.00	\$102,285.58	\$3,654.41	\$105,939.99	\$33,760.01

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

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

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: 05-AUG-11
Invoice Number: 37150731

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Bill Through Date : 02-JUL-11 to 29-JUL-11

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

Task Number : 0100

Task Name : INSTALLATION ACTIVIT

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	15-JUL-11	-10.00	97.50	-975.00
Gregorio, Helena	P12	15-JUL-11	-0.50	97.50	-48.75
Total Labor Bill Rate				-10.50	-1,023.75

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Miscellaneous - Allowable	Callahan, Colin P	19-MAY-11	RCL852240251	-374.00	1.0800	-403.92
Postage & Shipping	US ACM ZERO AP	14-JUL-11	GRP069BCJUL1FE	185.02	1.0000	185.02
Rent - Equipment	ENTERPRISE RENT A CAR	13-MAY-11	RCL852238074	-188.42	1.0800	-203.49
Rent - Equipment	ENTERPRISE RENT A CAR	21-JUN-11	RCL852261660	-88.32	1.0800	-95.39
Total Reimbursable				-465.72		-517.78

Task Total : INSTALLATION ACTIVIT

Task 100- Installation
Task 200- Evaluation

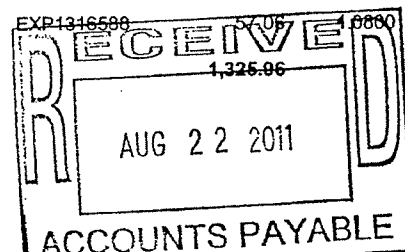
Task Number : 0200

Task Name : EVALUATION ACTIVITIE

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P12	08-JUL-11	16.00	97.50	1,560.00
Callahan, Colin P	P12	15-JUL-11	21.00	97.50	2,047.50
Callahan, Colin P	P12	29-JUL-11	8.00	97.50	780.00
Gregorio, Helena	P12	08-JUL-11	0.75	97.50	73.13
Gregorio, Helena	P12	15-JUL-11	1.00	97.50	97.50
Mosquera, Justin L	P17	15-JUL-11	0.50	155.00	77.50
Total Labor Bill Rate				47.25	4,635.63

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Lunch	Callahan, Colin P	05-JUL-11	EXP1316588	15.19	1.0800	16.41
Miscellaneous - Allowable	Callahan, Colin P	19-MAY-11	RCL852240251	374.00	1.0800	403.92
Rent - Equipment	ENTERPRISE RENT A CAR	13-MAY-11	RCL852238074	188.42	1.0800	203.49
Rent - Equipment	ENTERPRISE RENT A CAR	21-JUN-11	RCL852261660	88.32	1.0800	95.39
Rent - Equipment	PALMS ENVIRONMENTAL & SURVEY	05-JUL-11	16177	602.97	1.0800	651.21
Travel All Other	Callahan, Colin P	05-JUL-11	EXP1316588	57.06	1.0800	61.62
Total Reimbursable				1,325.96		1,432.04

DO 64025
30.40.00.00.182.29.00



Task Total : EVALUATION ACTIVITIE

6,067.67

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

4,526.14

Invoice Summaries

Total Current Amount :	4,526.14
Retention Amount :	0.00
Pre-Tax Amount :	4,526.14
Tax Amount :	0.00

Total Invoice Amount :

4,526.14

Billing Summaries

<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	4,526.14	105,940.37	110,466.51		
Billing Total :	4,526.14	105,940.37	110,466.51		

Outstanding Invoices

<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37150731	05-AUG-11	4,526.14

Outstanding Total :

4,526.14

Synergy Environmental Lab, INC.

Invoice

JOHN LINK
AECOM

1035 KEPLER DRIVE
GREEN BAY WI 54311

Client Account # 100827
Project # 60156231
Project Name SHOPKO
Notes 15877

AECOM #: 41001 5845-62N ENV (ACM44)

Project #: 60156231

Task #: 5

Expenditure Type: MISC-Misc-Allow

PO # (if applicable):

PO Line # (if applicable):

Amount: 450.00

Date Approved: 7/12/11

Approval Signature: [Signature]

Approver's Employee #: 645559

Approver's Phone #: 906-246-4981

Pay When Paid: Yes ☐ No ☒

1409130

Invoice # E22417
Invoice Date 7/5/2011
Quote # 1887
Date Due 8/4/2011
Sample Date 6/23/2011

Sample ID	Labcode	Sample Type	Matrix	Test Name	Price
MW-24	5022417A	Sample	Water	BTEX + FIVE	\$45.00
PZ-24	5022417B	Sample	Water	BTEX + FIVE	\$45.00
MW-23	5022417C	Sample	Water	BTEX + FIVE	\$45.00
MW-25	5022417D	Sample	Water	BTEX + FIVE	\$45.00
EXT-2	5022417E	Sample	Water	BTEX + FIVE	\$45.00
MW-26	5022417F	Sample	Water	BTEX + FIVE	\$45.00
MW-2R	5022417G	Sample	Water	BTEX + FIVE	\$45.00
PZ-22	5022417H	Sample	Water	BTEX + FIVE	\$45.00
MW-22	5022417I	Sample	Water	BTEX + FIVE	\$45.00
DUP	5022417J	Sample	Water	BTEX + FIVE	\$45.00
TB	5022417K	Blank	Water	BTEX + FIVE	\$0.00

Total Cost: \$450.00

To ensure proper payment,
include Account # Invoice #

PLEASE REMIT PAYMENT TO:
SYNERGY ENVIRONMENTAL LAB, INC.
1990 PROSPECT CT.,
APPLETON, WI 54914

AECOM PA Invoice Billing Backup - NonLabor

Customer Name: UNITIL SERVICES CORPORATON
 Invoice Number: 37150731
 Invoice Date: 02-JUL-11 to 29-JUL-11
 Project: 60139734 13046004 2010 PHYTOREMEDIATION PROG

Page 1 of 1

Task: 0100		INSTALLATION ACTIVIT					
Category : Reimbursables							
Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
Callahan, Colin P	Miscellaneous - Allowab	19-MAY-11	RCL852240251	852293767	-374.00	1.080	-403.92
ENTERPRISE RENT A CAR	Rent - Equipment	13-MAY-11	RCL852238074	852293730	-188.42	1.080	-203.49
ENTERPRISE RENT A CAR	Rent - Equipment	21-JUN-11	RCL852261660	852293733	-88.32	1.080	-95.39
US ACM ZERO AP	Postage & Shipping	14-JUL-11	GRP069BCJUL1FED	852291861	185.02	1.000	185.02
Category Total :					-465.72		-517.78
Total for Task: 0100					-465.72		-517.78

Task: 0200		EVALUATION ACTIVITIE					
Category : Reimbursables							
Employee/Vendor Name	Expenditure Type	Expdt	Invoice Num	Voucher num	Raw Cost	Multi	Billed Amt
Callahan, Colin P	Miscellaneous - Allowab	19-MAY-11	RCL852240251	852293767	374.00	1.080	403.92
Callahan, Colin P	Lunch	05-JUL-11	EXP1316588	852303036	15.19	1.080	16.41
Callahan, Colin P	Travel All Other	05-JUL-11	EXP1316588	852303036	50.06	1.080	54.06
Callahan, Colin P	Travel All Other	05-JUL-11	EXP1316588	852303036	7.00	1.080	7.56
ENTERPRISE RENT A CAR	Rent - Equipment	13-MAY-11	RCL852238074	852293730	188.42	1.080	203.49
ENTERPRISE RENT A CAR	Rent - Equipment	21-JUN-11	RCL852261660	852293733	88.32	1.080	95.39
PALMS ENVIRONMENTAL & SURV	Rent - Equipment	05-JUL-11	16177	852328846	602.97	1.080	651.21
Category Total :					1,325.96		1,432.04
Total for Task: 0200					1,325.96		1,432.04

Project Invoice Total:	60139734	860.24	914.26
------------------------	----------	--------	--------

Confirmation

Expense report number EXP1283192 for 485.11 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP1283192

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 Expense 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 Expense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name Callahan, Colin P (647972)
Expense Dates 19-MAY-2011 - 07-JUN-2011
Cost Center (DEPT) 5826
Detailed Business Purpose Data DL & Purge H20 Drop Off
Approver Mosquera, Justin L
Receipts Status Required

Report Submit Date 16-JUN-2011
Attachments View
Report Total 485.11 USD
Reimbursement Amount 485.11 USD

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-May-2011	374.00 USD	MISC-Miscellaneous	Probe 12 Repair		✓		+	FE	374.00					
06-Jun-2011	50.00 USD	MISC-Miscellaneous	Gas		✓		+	FE	50.00					
06-Jun-2011	7.00 USD	MISC-Miscellaneous	Tolls				+	FE	7.00					
06-Jun-2011	16.19 USD	MISC-Miscellaneous	Lunch				+	FE	16.19					
06-Jun-2011	5.00 USD	MISC-Miscellaneous	Drinks				+	FE	5.00					
	12.92	MISC-	Field											

[illegible]

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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WELCOME

T033650162-001
SUNOCO 0267962900
29 CHARLES STREET
ROCHESTER NH 0386

DATE 06/06/11
TIME 12:00 PM
AUTH# 539544

AMEX
ACCOUNT NUMBER
XXXX XXXXXX X1008

PUMP PRODUCT PPG
06 UNLD \$3.799

GALLONS TOTAL
13.162 \$50.00

THANK YOU
HAVE A NICE DAY

14
QUALITY'S MARKET

ALWAYS THE FRESHEST QUALITY
FOR YOUR FAMILY
(860) 551-3833

C01 C2 02495357 05/07/11 10:21 PM PAT 321
COFF LOTION \$12.19 T

SUBTOTAL \$12.19
SALES TAX \$0.73
TOTAL \$12.92

VISA \$12.92

A-PRO-EC
A2TH 5XXXXXX0XXXXX7152
05/07/11 10:19
AUTH # C15938
ED # 6780
ERM ID: LK650X63

CASH \$0.00

OF ITEMS: 1

THANK YOU

DYNAMAX
10008 FALLSTONE RD
HOUSTON TX 77039
800-896-7108
Merchant ID: 512178430104158
Term ID: 0403

Sale

VISA

XXXXXXXXXXXX7152

Entry Method: Manual

Apprvd: Online Batch#: 000006
05/19/11

15:35:27

Inv#: 00000001 Appr Code: 055248

Total: \$ 374.00

Customer Copy

Confirmation

Expense report number EXP1316588 for 72.25 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP1316588

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 Expense 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 Expense homepage and view the information under the 'Track Submitted Expense Reports' region.

General Information

Name	Callahan, Colin P (647972)	Report Submit Date	12-JUL-2011
Expense Dates	05-JUL-2011 - 05-JUL-2011	Attachments	View
Cost Center (DEPT)	5826	Report Total	72.25 USD
Detailed Business Purpose	Data DL & Water	Reimbursement Amount	72.25 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
05-Jul-2011	50.06 USD	MISC-Miscellaneous	Gas		✓		+		50.06					
05-Jul-2011	15.19 USD	TRA-Lunch	Lunch				+		15.19					
05-Jul-2011	7.00 USD	MISC-Miscellaneous	Tolls				+		7.00					
Total									72.25					

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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OH THANK HEAVEN
FOR 7-11.

7-ELEVEN
237 MAIN STREET
NORTH READING MA
PHONE #9786646357
STORE #30238
TID: 00073023811 08
AMEX
*****1000
REF# 92000 04 036 8
07/05/2011 14:58:50

PUMP GRADE RUL 3
GALLONS 13.833
PRICE/GAL \$ 3.619
FUEL SALE \$ 50.06

APPROVED 522380

THANKS FOR
YOUR BUSINESS.

WILD MILLY'S BURGERS
12 GONIC ROAD
ROCHESTER NH 03867
603-332-1133

Merchant ID: 66005130471601

Sale

XXXXXXXXXX7152

VISA Entry Method: Swiped

Total: \$ 15.19

07/05/11 12:34:53

Inv# 000010 Appr Code: 035448

Approved: Online Batch#: 0000391

Customer Copy
THANK YOU!
COME AGAIN!

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE M6 ATTENDANT 80791
07/05/2011 11:05:57
Class 1 \$2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 80789
07/05/2011 11:18:37
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE S1 ATTENDANT 77481
07/05/2011 13:12:37
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE S1 ATTENDANT 78342
07/05/2011 13:01:07
Class 1 \$0.75 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE S6 ATTENDANT 80848
07/05/2011 13:25:22
Class 1 \$2.00 US Cash

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 79571
07/05/2011 11:29:58
Class 1 \$0.75 US Cash

Rental Invoice



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Bill To:

0001343-0000/00003-T-1000010700

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

RENTAL INFORMATION

Date Out 4/29/11 12:11PM Date In 5/13/11 3:51P

Renter
COLIN CALLAHAN

Additional Driver

Name
NONE

RENTAL VEHICLES

Color	License No.	Claim #/Policy #/P.O. #	
BLACK	861CS1		
Model	Unit #	Insured	
10 TAHO	7D8PH9		
Color	License No.	Date of Loss	Type of Loss
SILVER	FAC5015		
Model	Unit #	Type of Car	Repair Shop
10 300	7DYL01		
Model	Unit #		
11 S2HC	705CGX		

CLAIM INFORMATION

Rental Agreement

0234418 - 10U8

BILLING DETAIL

Description	Rate	Amount
4 HOURS @	14.75	59.00
1 DAYS @	59.00	59.00
1 WEEKS @	484.00	484.00
1 WEEKS @	346.50	346.50
PKGSCH		.60
VLCREC FEE		12.25
VLCREC FEE		12.25
VLCREC FEE		1.75
SALES TX %	6.25	60.96

AMOUNT DUE 1036.31

IMPORTANT INFORMATION

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

Remit to:

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

AMOUNT DUE 1036.31

Paid by:

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

05/18

Customer# Rental Agreement Amount GPBR
NA10F08 D234418 1036.31 10U8

AECOM #: 41001

Project #: 60191739

Task #: 400

Expenditure Type: off-rent Equip

PO # (if applicable): -

PO Line # (if applicable): -

Amount: \$ 659.47

Date Approved: 6/14/11

Approval Signature: [Signature]

Approver's Employee #: 647972

Approver's Phone #: 978-589-3102

Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60139732

Task #: 0200

Expenditure Type: off-rent Equip

PO # (if applicable): -

PO Line # (if applicable): -

Amount: \$ 94.21

Date Approved: 6/14/11

Approval Signature: [Signature]

Approver's Employee #: 647972

Approver's Phone #: 978-589-3102

Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60137734

Task #: 0100

Expenditure Type: off-rent Equip

PO # (if applicable): -

PO Line # (if applicable): -

Amount: \$ 188.42

Date Approved: 6/14/11

Approval Signature: [Signature]

Approver's Employee #: 647972

Approver's Phone #: 978-589-3102

Pay When Paid: Yes ☐ No ☒

M09130

AECOM #: 41001

Project #: 60137978

Task #: 905

Expenditure Type: off-rent Equip

PO # (if applicable): -

PO Line # (if applicable): -

Amount: \$ 94.21

Date Approved: 6/14/11

Approval Signature: [Signature]

Approver's Employee #: 647972

Approver's Phone #: 978-589-3102

Pay When Paid: Yes ☐ No ☒

M09130

Rental Invoice



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Bill To:

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

RENTAL INFORMATION

Date Out 5/27/11 10:04AM Date In 6/21/11 10:03A
Renter COLIN CALLAHAN

Additional Driver

Name
NO OTHER DRIVER PERMITTED

RENTAL VEHICLES CLAIM INFORMATION

Color SILVER License No. 839FS6 Claim #/Policy #/P.O. #
Model 11 S15C Unit # 7DKL4W Insured
Date of Loss Type of Loss
Type of Car Repair Shop

Rental Agreement

D234794 - 10U8

BILLING DETAIL

Description	Rate	Amount
3 WEEKS @	357.50	1,072.50
SPECIAL @	32.50	130.00
PKGSCH		.60
VLCREC FEE		43.75
SALES TX %	6.25	77.93

SEE
2nd SHEET

AMOUNT DUE 1324.78

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

Remit to:

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

AMOUNT DUE 1324.78

Paid by:

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

06/23

Customer# NA10F08 Rental Agreement D234794 Amount 1324.78 GPBR 10U8

AECOM #: 41001

Project #: 60191739
Task #: 700
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$353.27
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60146715
Task #: 1
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60147320
Task #: 1
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60139734
Task #: 0100
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60139734
Task #: 0200
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$264.96
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60197271
Task #: 2
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60156125
Task #: 600
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

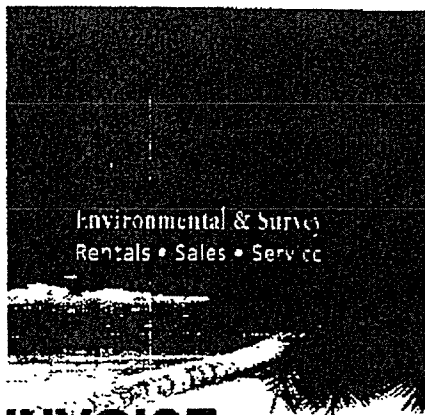
M09130

AECOM #: 41001

Project #: 60137978
Task #: 905
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$176.64
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒

M09130

Project #: 60218395
Task #: 2
Expenditure Type: off-rot Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$88.32
Date Approved: 6/27/11
Approval Signature:
Approver's Employee #: 647972
Approver's Phone #: 978-589-3102
Pay When Paid: Yes No ☒



AECOM #: 41001

Project #:

60139734

Task #:

0200

Expenditure Type: off-rat EQUIP

PO # (if applicable):

PO Line # (if applicable):

Amount:

\$ 602.97

Date Approved:

7/26/11

Approval Signature:

Approver's Employee #:

647972

Approver's Phone #:

978-905-2139

Pay When Paid:

Yes

No

M09130

INVOICE

DATE

INVOICE #

7/5/2011

16177

BILL TO:

AECOM
2 Technology Drive
Westford, MA 01886

SHIP TO:

Customer P/U
Attn: Colin Callahan

P.O. NUMBER

TERMS

SHIP DATE

601397234

Net 30

6/3/2011

SHIP VIA

PROJECT #

JOB NAME

Cust PU

RENTAL DAYS / QTY

DESCRIPTION

COST

EXTENSION

20

***** MONTHLY INVOICE *****
Rental charges for In-Situ Level Troll 700, S/N-105480, from 6/6/11 to 7/5/11 at \$23.625/day Fixed Monthly Discounted Rate for 20 days.

23.625

472.50T

1

Rental charges for In-Situ Rugged Reader, S/N-43528, from 6/6/11 to 6/6/11 at \$25.00/ONE RATE DAILY for 1 day.

25.00

25.00T

1

Rental charges for In-Situ Rugged Reader, S/N-43528, from 6/17/11 to 6/17/11 at \$25.00/ONE RATE DAILY for 1 day.

25.00

25.00T

1

Rental charges for In-Situ Rugged Reader, S/N-43528, from 7/5/11 to 7/5/11 at \$25.00/ONE RATE DAILY for 1 day.

25.00

25.00T

1

Rental charges for Solinst Water Level, S/N-40596, from 6/17/11 to 6/17/11 at \$20.00/ONE RATE DAILY for 1 day.
Sales Tax

20.00

20.00T

6.25%

35.47

TOTAL AMOUNT DUE \$602.97***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

Murphy, Thomas

From: Mosquera, Justin [Justin.Mosquera@aecom.com]
Sent: Thursday, August 18, 2011 9:44 AM
To: Murphy, Thomas
Subject: RE: Rochester - Phytoremediation Invoice 37150731
Tom-

AECOM invoices provide billing for labor on a weekly basis. For Task 0200 Colin Callahan billed 16 hours for the week ending July 8, 2011 and 21 hours for the week ending July 15, 2011. An explanation of the hours is provided below:

Week of 08-Jul-11 (16 hours)

Tuesday July 5th (12 hours) – Downloaded data from the water level data logger and thermal dissipation probes and performed comprehensive irrigation round.

Friday July 8th (4 hours) – Uploading data from 7-5-11 site visit and manipulating this data and data from previous download events.

Week of 15-Jul-11 (21 hours)

Monday July 11th (3 hours) – Follow-up data manipulation following senior review/input. Prep for 7-15-11 activities. Reimbursable allocation.

Friday July 15th (8 hours) – Downloaded data from the water level data logger and thermal dissipation probes and performed partial irrigation round.

Pre-July Costs (10 hours) – These costs had been charged to task 0100 in a previous 2011 invoice in error and the change took a while to hit in AECOM's accounting system. The week ending 15-Jul-11 was when the change took effect. There is no actual charge for this invoicing period since the 10 hours is off-set by a credit under task 0100.

Will you need invoicing provided on a daily basis going forward? I believe our timesheet system has a tool where I could accomplish this and provide a more descriptive narrative (it won't show up on the invoice), I just need to know the level of detail you need. Please let me know how you want to proceed or if you need any additional information.

Thanks,
Justin

From: Murphy, Thomas [mailto:murphyt@unitil.com]
Sent: Thursday, August 18, 2011 7:57 AM
To: Mosquera, Justin
Subject: Rochester - Phytoremediation Invoice 37150731

Justin,

I have a quick question on the attached invoice. Were the hours billed by Colin Callahan on July 8 and 15 actually worked on those days or are they cumulative over several days? If they are over several days, please provide the date and hours worked and I'll attach it in the invoice for processing.

8/18/2011

I know data logging can be tedious, but... 16 hours and 21 hours per day seems a bit excessive. That's why the units are left out there so that the technician isn't. Thanks!

Tom

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

PC 64025
DL

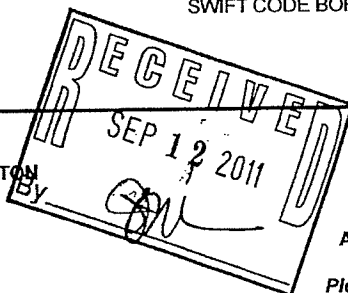
9/15/11

AECOM

250 Apollo Drive, Chelmsford, MA 01824
Telephone: 978-905-2100 Fax: 978-905-2101

Federal Tax ID No.
06-0852759

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



Invoice Date: 01-SEP-11
Invoice Number: 37159675

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Bill Through Date : 30-JUL-11 to 26-AUG-11

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

Task Number : 0100

Task Name : INSTALLATION ACTIVIT

Labor Bill Rate					
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Gregorio, Helena	P12	05-AUG-11	1.00	97.50	97.50
Mosquera, Justin L	P17	19-AUG-11	1.75	155.00	271.25
Total Labor Bill Rate			2.75		368.75

Reimbursable						
Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Postage & Shipping	US ACM ZERO AP	23-JUN-11	RCL852249110	185.02	1.0000	185.02
Postage & Shipping	US ACM ZERO AP	16-AUG-11	GRP146BCAUG11F	185.02	1.0000	185.02
Total Reimbursable				370.04		370.04

Task Total : INSTALLATION ACTIVIT

738.79

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	19-AUG-11	3.00	97.50	292.50
Gregorio, Helena	P12	12-AUG-11	0.25	97.50	24.38
Kirkwood, Gemma	P13	05-AUG-11	2.75	105.00	288.75
Mosquera, Justin L	P17	05-AUG-11	0.75	155.00	116.25
Total Labor Bill Rate			6.75		721.88

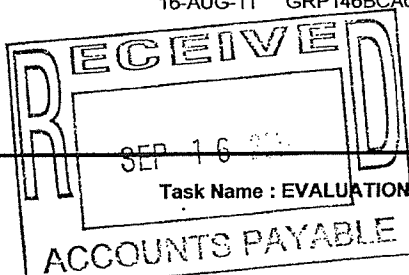
Reimbursable						
Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Miscellaneous - Allowable	Callahan, Colin P	15-JUL-11	EXP1359972	23.19	1.0800	25.05
Miscellaneous - Allowable	Callahan, Colin P	16-JUL-11	EXP1359972	52.62	1.0800	56.83
Miscellaneous - Allowable	Callahan, Colin P	24-JUL-11	EXP1359972	43.58	1.0800	47.07
Miscellaneous - Allowable	Callahan, Colin P	25-JUL-11	EXP1359972	68.74	1.0800	74.24
Miscellaneous - Allowable	Callahan, Colin P	17-AUG-11	EXP1359972	23.19	1.0800	25.05
Rent - Equipment	PALMS ENVIRONMENTAL & SURVEY	04-AUG-11	16323	555.16	1.0800	599.57
Total Reimbursable				766.48		827.81

Task Total : EVALUATION ACTIVITIE

1,549.99

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

2,288.48



PO. 64025

Invoice Summaries

Total Current Amount :	2,288.48
Retention Amount :	0.00
Pre-Tax Amount :	2,288.48
Tax Amount :	0.00

Total Invoice Amount :

2,288.48 *OK*

Billing Summaries

<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	2,288.48	110,466.51	112,754.99		
Billing Total :	<u>2,288.48</u>	<u>110,466.51</u>	<u>112,754.99</u>		

Outstanding Invoices

<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37159675	01-SEP-11	2,288.48

Outstanding Total :

2,288.48

AECOM PA Invoice Billing Backup - NonLabor

Page 1 of 1

Customer Name: UNITIL SERVICES CORPORATON
 Invoice Number: 37159675
 Invoice Date: 30-JUL-11 to 26-AUG-11
 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
 US ACM ZERO AP Postage & Shipping 23-JUN-11 RCL852249110 852338950 185.02 1.000 185.02
 US ACM ZERO AP Postage & Shipping 16-AUG-11 GRP146BCAUG11FE 852368458 185.02 1.000 185.02
 Category Total : 370.04 370.04
 Total for Task: 0100 370.04 370.04

Task: 0200 EVALUATION ACTIVITIE
 Category : Reimbursables
 Employee/Vendor Name Expenditure Type Expdt Invoice Num Voucher num Raw Cost Multi Billed Amt
 Callahan, Colin P Miscellaneous - Allowab 15-JUL-11 EXP1359972 852386569 7.00 1.080 7.56
 Callahan, Colin P Miscellaneous - Allowab 15-JUL-11 EXP1359972 852386569 16.19 1.080 17.49
 Callahan, Colin P Miscellaneous - Allowab 16-JUL-11 EXP1359972 852386569 52.62 1.080 56.83
 Callahan, Colin P Miscellaneous - Allowab 24-JUL-11 EXP1359972 852386569 43.58 1.080 47.07
 Callahan, Colin P Miscellaneous - Allowab 25-JUL-11 EXP1359972 852386569 7.00 1.080 7.56
 Callahan, Colin P Miscellaneous - Allowab 25-JUL-11 EXP1359972 852386569 16.19 1.080 17.49
 Callahan, Colin P Miscellaneous - Allowab 25-JUL-11 EXP1359972 852386569 45.55 1.080 49.19
 Callahan, Colin P Miscellaneous - Allowab 17-AUG-11 EXP1359972 852386569 16.19 1.080 17.49
 Callahan, Colin P Miscellaneous - Allowab 17-AUG-11 EXP1359972 852386569 7.00 1.080 7.56
 PALMS ENVIRONMENTAL & SURV Rent - Equipment 04-AUG-11 16323 852388917 555.16 1.080 599.57
 Category Total : 766.48 827.81
 Total for Task: 0200 766.48 827.81

Project Invoice Total: 60139734 1,136.52 1,197.85

Confirmation

Expense report number EXP1359972 for 211.32 has been submitted to Mosquera, Justin L for approval.

Expense Report EXP1359972

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 (847972)	Report Submit Date	18-AUG-2011
Expense Dates	15-JUL-2011 - 17-AUG-2011	Attachments	View
Cost Center (DEPT)	5826	Report Total	211.32 USD
Detailed Business Purpose	TDP, Troll & Watering	Reimbursement Amount	211.32 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
15-Jul-2011	16.19 USD	MISC-Miscellaneous	Lunch				+		16.19					
15-Jul-2011	7.00 USD	MISC-Miscellaneous	tolls				+		7.00					
16-Jul-2011	52.62 USD	MISC-Miscellaneous	gas				+		52.62					
24-Jul-2011	43.58 USD	MISC-Miscellaneous	gas				+		43.58					
25-Jul-2011	16.19 USD	MISC-Miscellaneous	Lunch				+		16.19					
		MISC-												

25-Jul-2011	7.00 USD	Miscellaneous	tolls				+		7.00					
25-Jul-2011	45.55 USD	MISC-Miscellaneous	gas				+		45.55					
17-Aug-2011	16.19 USD	MISC-Miscellaneous	Lunch				+		16.19					
17-Aug-2011	7.00 USD	MISC-Miscellaneous	tolls				+		7.00					
Total									211.32					

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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

Merchant ID: 66085130471601

Sale

*****7152

VISA

Entry Method: Swiped

Total:

\$ 15.19
TAX TIP
19:48:28

08/17/11

Inv#: 000045

Appr Code: 045038

Apprvd: Online

Batch#: 000424

Customer Copy
THANK YOU!
COME AGAIN!

✓ 16.19

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

Merchant ID: 66085130471601

Sale

*****7152

VISA

Entry Method: Swiped

Total:

\$ 16.19

07/15/11

Inv#: 000015

13:46:04

Appr Code: 045538

Apprvd: Online

Batch#: 000401

Customer Copy
THANK YOU!
COME AGAIN!

WELCOME

SALES RECEIPT
57 544 920804
SHELL
110 MAIN STREET
READING MA 01867

DATE 07/16/11 10:01AM
INVOICE# 829952
AUTH# 586586
AMEX
ACCOUNT NUMBER
XXXX XXXXXX X1008

PUMP PRODUCT S/G
02 UNLD \$3.799

GALLONS FUEL TOTAL
13.852 \$ 52.62

THANK YOU
COME BACK SOON

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

Merchant ID: 66085130471601

Sale

*****7152

VISA

Entry Method: Swiped

Total:

\$ 16.19

07/25/11

12:38:57

Inv#: 000008

Appr Code: 035858

Apprvd: Online

Batch#: 000411

Customer Copy
THANK YOU!
COME AGAIN!

WELCOME

SALES RECEIPT
11 600 220053
SHELL
265 CENTRAL ST.
BERLIN MA 01503

DATE 07/25/11 5:21PM
INVOICE# 449439
AUTH# 542403
AMEX
ACCOUNT NUMBER
XXXX XXXXXX X1008

PUMP PRODUCT S/G
02 UNLD \$3.919

GALLONS FUEL TOTAL
11.623 \$ 45.55

TOTAL SALE \$ 45.55

Save 10cents/gal
instantly at Shell
when you earn 100
points at Stop &
Shop.
Pick up a brochure
at your local Shell
for more details.

THANK YOU
COME BACK SOON

WELCOME

TP25669727-081
READING GULF EXPRESS
85 MAIN STREET
READING MA 0186

DATE 07/24/11
TIME 12:19 PM
AUTH# 588326

AMEX

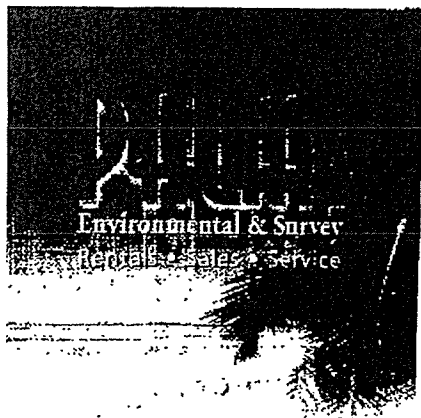
PUMP PRODUCT PPG
11 UNLD \$3.859

GALLONS TOTAL
11.292 \$43.58

THANK YOU
HAVE A NICE DAY

7.
7.
1

43.58



AECOM #: 41001

Project #: 60139 734

Task #: 0200

Expenditure Type: off-rnt EQUSP

PO # (if applicable):

PO Line # (if applicable):

Amount: \$ 555.16

Date Approved: 8/18/11

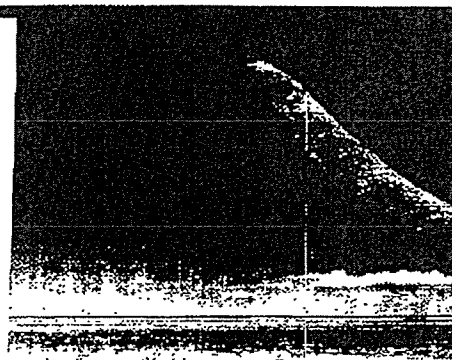
Approval Signature: [Signature]

Approver's Employee #: 647172

Approver's Phone #: 978-905-2139

Pay When Paid: Yes ☐ No ☒

M09130

**INVOICE**

DATE	INVOICE #
8/4/2011	16323

BILL TO:		
AECOM 250 Apollo Drive Chelmsford, MA 01824		
P.O. NUMBER	TERMS	SHIP DATE
601397234	Net 30	8/3/2011

SHIP TO:		
Customer P/U Attn: Colin Callahan		
SHIP VIA	PROJECT #	JOB NAME
Cust PU		

RENTAL DAYS / QTY	DESCRIPTION	COST	EXTENSION
***** MONTHLY INVOICE *****			
20	Rental charges for In-Situ Level Troll 700, S/N-105480, from 7/6/11 to 8/5/11 at \$23.625/day Fixed Monthly Discounted Rate for 20 days.	23.625	472.50T
1	Rental charges for In-Situ Rugged Reader, S/N-43528, from 7/15/11 to 7/15/11 at \$25.00/ONE RATE DAILY for 1 day.	25.00	25.00T
1	Rental charges for In-Situ Rugged Reader, S/N-43528, from 7/29/11 to 7/29/11 at \$25.00/ONE RATE DAILY for 1 day.	25.00	25.00T
	Sales Tax	6.25%	32.66

TOTAL AMOUNT DUE \$555.16**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

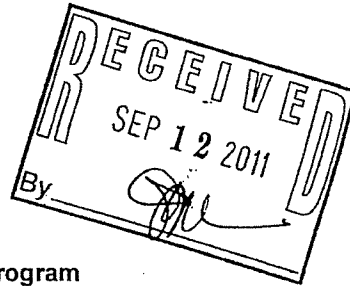


AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

September 6, 2011

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



AECOM Ref. No.: 60139734-Inv26

**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 August 26, 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 \$2,288.48. 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

During this invoicing period project management and residual shipping costs were incurred under this task. As detailed in Table 1 and the attached invoice, the cost incurred in August 2011 associated with this task was \$738.79.

Task 0200 2011 Continued Groundwater Suppression Evaluation Activities

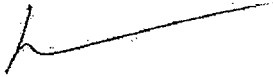
During this invoicing period AECOM integrated data downloads from the water level data logger and thermal dissipation probes with historic Site data. Expenses incurred in July 2011 and rental charges were also allocated during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in August 2011 associated with this task was \$1,549.69.

AECOM

2

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2011 Phytoremediation Program
August 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	\$39,353.59	\$738.79	\$40,092.38	\$3,607.62
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$71,112.54	\$1,549.69	\$72,662.23	\$23,337.77
Total		\$139,700.00	\$38,900.00	\$110,466.13	\$2,288.48	\$112,754.61	\$26,945.39

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

DUE IMMEDIATELY

Reg 85444
OL

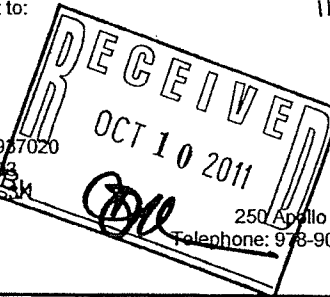
11/8/11

AECOM

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 BOFAUS33



250 Apollo Drive, Chelmsford, MA 01824
Telephone: 978-905-2100 Fax: 978-905-2101

Federal Tax ID No.
06-0852759

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

Invoice Date: 28-SEP-11
Invoice Number: 37167889

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
Bill Through Date : 27-AUG-11 to 23-SEP-11

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

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	09-SEP-11	0.50	190.00	95.00
Total Labor Bill Rate			0.50		95.00

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Postage & Shipping	US ACM ZERO AP	31-AUG-11	GRP015BCSEP11R	-185.02	1.0000	-185.02
Total Reimbursable				-185.02		-185.02

Task Total : INSTALLATION ACTIVIT

-90.02

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	02-SEP-11	6.00	97.50	585.00
Callahan, Colin P	P12	09-SEP-11	1.00	97.50	97.50
Callahan, Colin P	P12	16-SEP-11	4.00	97.50	390.00
Callahan, Colin P	P12	23-SEP-11	6.00	97.50	585.00
Desai, Maya C	P16	16-SEP-11	0.50	135.00	67.50
Mosquera, Justin L	P17	02-SEP-11	1.00	155.00	155.00
Mosquera, Justin L	P17	09-SEP-11	1.25	155.00	193.75
Total Labor Bill Rate			19.75		2,073.75

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Miscellaneous - Allowable	Callahan, Colin P	30-AUG-11	EXP1377786	23.19	1.0800	25.05
Rent - Equipment	ENTERPRISE RENT A CAR	20-AUG-11	D235272	303.53	1.0800	327.81
Total Reimbursable				326.72		352.86

Task Total : EVALUATION ACTIVITIE

2,426.61

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

2,336.59

Invoice Summaries

Total Current Amount :

2,336.59

PO 64025

*PO amount exceeded
check request made*

Invoice Summaries

Retention Amount :	0.00
Pre-Tax Amount :	2,336.59
Tax Amount :	0.00
Total Invoice Amount :	<u>2,336.59</u>

Billing Summaries

<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	2,336.59	112,754.99	115,091.58		
Billing Total :	<u>2,336.59</u>	<u>112,754.99</u>	<u>115,091.58</u>		

Outstanding Invoices

<u>Invoice Number</u>	<u>Invoice Date</u>	<u>Invoice Balance</u>
37167889	28-SEP-11	2,336.59
Outstanding Total :		<u>2,336.59</u>

Accounting: 30.⁴⁰56.00.00.182.29.00

Description: Aug/ Sep 2011 Phyto remediation work
at Rochester, NH MBP.

Confirmation

Expense report number EXP1377786 for 23.19 has been submitted to Mosquera, Justin L. for approval.

Expense Report EXP1377786

 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	Cellehan, Colin P (647972)	Report Submit Date	30-AUG-2011
Expense Dates	30-AUG-2011 - 30-AUG-2011	Attachments	View
Cost Center (DEPT)	5826	Report Total	23.19 USD
Detailed Business Purpose	Data DL	Reimbursement Amount	23.19 USD
Approver	Mosquera, Justin L.		
Receipts Status	Not 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
30-Aug-2011	7.00 USD	MISC-Miscellaneous	tois						7.00					
30-Aug-2011	16.19 USD	MISC-Miscellaneous	lunch						16.19					
Total									23.19					

[Expense Lines](#) [Expense Allocations](#) [Weekly Summary](#) [Approval Notes \[0\]](#)

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X2

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Hampton Main
LANE N5 ATTENDANT 86070
08/30/2011 12:52:21
Class 1 \$2.00 US Cash

X2

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Dover
LANE N1 ATTENDANT 80305
08/30/2011 13:05:01
Class 1 \$0.75 US Cash

X2

NEW HAMPSHIRE
BUREAU OF TURNPIKES
Rochester
LANE N1 ATTENDANT 78259
08/30/2011 13:16:38
Class 1 \$0.75 US Cash

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

Merchant ID: 66005130471601

Sale

~~XXXXXXXXXX~~7152

VISA

Entry Method: Signed

Total: \$ 16.19

08/30/11

14:12:35

Inv#: 000028

Appr Code: 015268

Apprvd: Online

Batch#: 000447

Customer Copy
THANK YOU!
COME AGAIN!



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

BID To:

000-0000-000071800007 - 3 - (CONTINUED) OF 000

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS-COLI•
250 Apollo Drive
Chelmsford MA 01824

RENTAL INFORMATION

Date Out 6/27/11 3:34PM **Date In** 8/20/11 8:30A

Renter
COLIN CALLAHAN

Additional Driver

Name
NONE

RENTAL VEHICLES CLAIM INFORMATION

Color	License No.	Claim #/Policy #/P.O. #	
RED MED	747GV7		
Model	Unit #	Insured	
11 SANF	7FHNHV		
Color	License No.	Date of Loss	Type of Loss
GRAY MED	592LV3		
Model	Unit #	Type of Car	Repair Shop
11 F15C	7FQ145		
Model	Unit #		
11 S15C	7DKLAW		
Model	Unit #		
11 PATR	7DBFWC		

Rental Agreement

0235272 - 10118

BILLING DETAIL

Description	Rate	Amount
3 DAYS @	65.00	195.00
3 WEEKS @	209.00	627.00
1 MONTHS @	1,254.00	1,254.00
VLCREC FEE		42.00
PKGSCH		.60
VLCREC FEE		52.50
SALES TX %	6.25	135.69

AMOUNT DUE **2306.79**

IMPORTANT INFORMATION

Billing Inquiries Call **Fed Tax ID #**
978-367-0212 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

Remit to:

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

AMOUNT DUE **2306.79**

Paid by:

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS-COLI-
250 Apollo Drive
Chelmsford MA 01824

08/22

Customer#	Rental Agreement	Amount	GPBR
NA10F08	0235272	2306.79	10U8

AECOM #: 41001

Project #: 60160342
 Task #: ACU
 Expenditure Type: off-ret EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 182.12
 Date Approved: 8/31/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60139734
 Task #: 0200
 Expenditure Type: off-ret EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 303.53
 Date Approved: 8/31/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60214469
 Task #: 200
 Expenditure Type: off-ret EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 60.71
 Date Approved: 8/31/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60147320
 Task #: 1
 Expenditure Type: off-ret EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 1092.66
 Date Approved: 8/31/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60194685
 Task #: 0900
 Expenditure Type: off-ret EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 424.94
 Date Approved: 8/31/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60161121
 Task #: 6
 Expenditure Type: off-ret EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 60.71
 Date Approved: 8/31/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes ___ No X

M09130

AECOM #: 41001

Project #: 60139733
 Task #: 0300
 Expenditure Type: off-ret EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 182.12
 Date Approved: 8/31/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes ___ No X

M09130

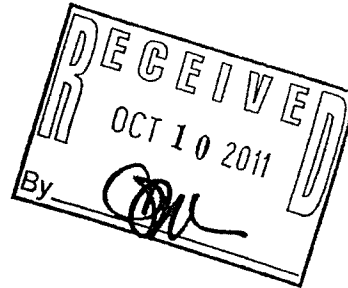


AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

October 3, 2011

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



AECOM Ref. No.: 60139734-Inv27

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 September 23, 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 \$2,336.59. 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

During this invoicing period a credit (\$90.02) was applied to this task as costs between t\Tasks 100 and 200 were corrected.

Task 0200 2011 Continued Groundwater Suppression Evaluation Activities

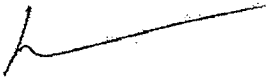
During this invoicing period AECOM performed site inspections as needed and integrated data downloads from the water level data logger and thermal dissipation probes with historic Site data. Data logging was terminated on September 22, 2011. Expenses incurred in August 2011 and vehicle rental charges for July and August 2011 were also allocated during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in September 2011 associated with this task was \$2,426.

AECOM

2

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2011 Phytoremediation Program
September 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	\$40,092.38	-\$90.02	\$40,002.36	\$3,697.64
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$72,662.23	\$2,426.61	\$75,088.84	\$20,911.16
Total		\$139,700.00	\$38,900.00	\$112,754.61	\$2,336.59	\$115,091.20	\$24,608.80

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

DUE 12/07/11

reg 86246
OL

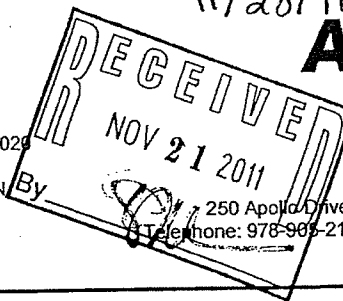
11/28/11

AECOM

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



250 Apollo Drive, Chelmsford, MA 01824
Telephone: 978-905-2100 Fax: 978-905-2101

Federal Tax ID No.
06-0852759

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

Invoice Date: 07-NOV-11
Invoice Number: 37179886

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
Bill Through Date : 24-SEP-11 to 28-OCT-11

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

Task Number : 0200

Task Name : EVALUATION ACTIVITIE

Labor Bill Rate

Employee Name/Title

Callahan, Colin P
Callahan, Colin P
Gregorio, Helena
Kirkwood, Gemma
Kirkwood, Gemma
Kirkwood, Gemma
Kirkwood, Gemma
Mosquera, Justin L
Mosquera, Justin L

Title/Expenditure

P12
P12
P12
P13
P13
P13
P13
P17
P17

Date

14-OCT-11
28-OCT-11
30-SEP-11
30-SEP-11
07-OCT-11
14-OCT-11
28-OCT-11
07-OCT-11
14-OCT-11

Hours

2.00
14.00
0.75
1.50
9.50
0.50
4.00
0.25
1.00

Bill Rate

97.50
97.50
97.50
105.00
105.00
105.00
105.00
155.00
155.00

Billed Amt

195.00
1,365.00
73.13
157.50
997.50
52.50
420.00
38.75
155.00

Total Labor Bill Rate

33.50

3,454.38

Reimbursable

Expenditure Type

Mileage
Mileage
Miscellaneous - Allowable
Miscellaneous - Allowable
Miscellaneous - Allowable
Rent - Equipment

Employee/Vendor Name

Callahan, Colin P
Callahan, Colin P
Callahan, Colin P
Callahan, Colin P
Callahan, Colin P
PALMS ENVIRONMENTAL &
SURVEY
ENTERPRISE RENT A CAR
PALMS ENVIRONMENTAL &
SURVEY

Date

13-SEP-11
22-SEP-11
13-SEP-11
22-SEP-11
03-OCT-11
12-SEP-11
14-SEP-11
04-OCT-11

Inv Number

EXP1454847
EXP1454847
EXP1452561
EXP1452561
EXP1452561
16495
D236287
16623

Raw Cost

71.40
71.40
28.68
23.19
89.86
555.16
40.43
221.80

Multiplier

1.0800
1.0800
1.0800
1.0800
1.0800
1.0800
1.0800
1.0800

Billed Amt

77.11
77.11
30.98
25.05
97.05
599.57
43.66
239.54

Total Reimbursable

1,101.92

1,190.07

Task Total : EVALUATION ACTIVITIE

4,644.45

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

4,644.45

Invoice Summaries

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

4,644.45
0.00
4,644.45
0.00

Total Invoice Amount :

4,644.45

Accounting: 30.40.00.00.182.29.00

Description: 09/11-10/11 Remediation Activities at
Rochester, NH MBP

4,644.45
- 17.74
OK 4,626.71

Billing Summaries					
<u>Billing Summary</u>	<u>Current</u>	<u>Prior</u>	<u>Total</u>	<u>Limit</u>	<u>Remain</u>
Billings	4,644.45	115,091.58	119,736.03		
Billing Total :	<u>4,644.45</u>	<u>115,091.58</u>	<u>119,736.03</u>		

Outstanding Invoices			
<u>Invoice Number</u>	<u>Invoice Date</u>		<u>Invoice Balance</u>
37167889	28-SEP-11	← ?	2,336.59
37179886	07-NOV-11		4,644.45
Outstanding Total :			<u>6,981.04</u>

Confirmation

Expense report number EXP1454847 contains policy violations. It has been submitted to Mosquera, Justin L for approval.

Expense Report EXP1454847

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)
Expense Dates 13-SEP-2011 - 22-SEP-2011
Cost Center (DEPT) 5826
Detailed Business Purpose Rochester O&M
Approver Mosquera, Justin L
Receipts Status Not Required

Report Submit Date 19-OCT-2011
Attachments None
Report Total 142.80 USD
Reimbursement Amount 142.80 USD

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**

Warning	Date	Receipt Amount	Expense Type	Merchant	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Guest's Country Name	Guest's Title	Organization Name	Business Purpose
	13-Sep-2011	71.40	TRA-USD Mileage	Mileage			+		71.40				
	22-Sep-2011	71.40	TRA-USD Mileage	Mileage			+		71.40				
Total									142.80				

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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Confirmation

Expense report number EXP1452561 for 141.73 has been submitted to Mosquera, Justin L. for approval.

Expense Report EXP1452561

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	19-OCT-2011
Expense Dates	13-SEP-2011 - 03-OCT-2011	Attachments	View
Cost Center (DEPT)	6826	Report Total	141.73 USD
Detailed Business Purpose	Rochester O&M	Reimbursement Amount	74.06 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**Credit Card 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
03-Oct-2011	67.67 USD	MISC-Miscellaneous	Gas	GULF OIL/LTD PARTNERSHIP	✓		+		67.67					
Total									67.67					

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
13-Sep-2011	5.49 USD	MISC-Miscellaneous	Field Supplies				+		5.49					
13-Sep-2011	7.00 USD	MISC-Miscellaneous	Tolls				+		7.00					

https://erpdpapps.aecomnet.com/OA_HTML/OA.jsp?page=/oracle/apps/ap/oie/entry/summary/webui/ConfirmationPG&_ti=90... 10/19/2011

13-Sep-2011	16.19 MISC-USD Miscellaneous	Lunch				+		16.19		
22-Sep-2011	7.00 USD MISC-Miscellaneous	Tolls				+		7.00		
22-Sep-2011	16.19 MISC-USD Miscellaneous	Lunch				+		16.19		
03-Oct-2011	15.19 MISC-USD Miscellaneous	Tolls				+		15.19		
03-Oct-2011	7.00 USD MISC-Miscellaneous	Tolls				+		7.00		
Total								74.06		

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

Corporate Card Business Expenses	67.67
Cash and Other Business Expenses	74.06
Expense Report Total	141.73 USD
Company Paying to Credit Card Issuer	67.67 USD
Reimbursement to You	74.06 USD
Corporate Card Personal Expenses	0.00
Corporate Card Itemized Personal Expenses	0.00
You Pay to Credit Card Issuer	0.00 USD

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WILD HILLY'S BURGERS
12 GUNIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 66085130471501

Sale

XXXXXXXX7152

VISA

Entry Method: Swiped

Total: \$ 15.19

10/03/11 18:30:29

Invt: 000027 Appr Code: 035048

Apprvd: Online Batch#: 000400

Customer Copy
THANK YOU!
COME AGAIN!

WELCOME

IP25669727-001
READING GULF EXPRESS
85 MAIN STREET
READING MA 0186

DATE 10/03/11
TIME 5:47 PM
AUTH# 537362

AMEX
CALLAHAN/CP

PUMP PRODUCT PPG
11 UNLD \$3.799

GALLONS TOTAL
17.812 \$67.67

THANK YOU
HAVE A NICE DAY

10/3/11
Tolls = \$7.00
#647977

Walgreens
There's a way™

207 10 4474 03520 027

RFN# 0352-0274-4743-1109-1320

F/A OUTDOOR EXT 1 5.49
TOTAL 5.49

VISA 5.49
ACCT#*****7152
CHANGE .00



104 S Main St Rochester, NH
STORE (603)332-9360

OPEN 24 HOURS
THANK YOU

SAVE ON YOUR PRESCRIPTIONS BY JOINING
WALGREENS PRESCRIPTION SAVINGS CLUB
SEE PHARMACY FOR DETAILS

SEPTEMBER 13, 2011 10:17 AM

How are we doing?
Enter our monthly sweepstakes for
\$3,000 cash

Visit
WWW.TELLWAG.COM
or call toll free
1-800-763-0547
within 72 hours to take a short
survey about this Walgreens visit

Survey#
0352-0274-474

Password
3110-9132-016

For contest rules, see store or
WWW.TELLWAG.COM

RETAIN THIS RECEIPT FOR YOUR RECORDS

SEPTEMBER 13, 2011 10:18 AM

9/13/11
Tolls = \$ 7.00
#647972

9/13/11
LUNCH = \$ 16.19
#647972

MILD MILLY'S BURGERS
12 GONIC ROAD
ROCHESTER NH 03867
603-332-1193

Merchant ID: 66805130471601

Sale

*****7152

VISA

Entry Method: Swiped

Total: \$ 16.19

09/22/11

12:02:16

Inv# 000006

Appr Code: 005240

Approved: Online

Batch# 000469

Customer Copy
THANK YOU!
COME AGAIN!

9/22/11
Tolls = \$ 7.00
#647972

PALMS

Environmental & Survey
Rentals • Sales • Service

INVOICE

DATE	INVOICE #
9/12/2011	16495

BILL TO: AECOM 250 Apollo Drive Chelmsford, MA 01824			SHIP TO: 239 Main Street Attn: Colin Callahan Reading, MA		
P.O. NUMBER	TERMS	SHIP DATE	SHIP VIA	PROJECT #	JOB NAME
601397234	Net 30	6/3/2011	Palms Truck		
RENTAL DAYS / QTY	DESCRIPTION			COST	EXTENSION
	***** MONTHLY INVOICE *****				
20	Rental charges for In-Situ Level Troll 700, S/N-105480, from 8/8/11 to 9/7/11 at \$23.625/day Fixed Monthly Discounted Rate for 20 days.			23.625	472.50T
2	Rental charges for In-Situ Rugged Reader, S/N-43528, on 8/17/11 and 8/30/11 at \$25.00/One Rate Daily for 2 days.			25.00	50.00T
	Sales Tax			6.25%	32.66
AECOM #: 41001 Project #: 60139734 Task #: 0200 Expenditure Type: Off-rod Equip. PO # (if applicable): - PO Line # (if applicable): - Amount: \$555.16 Date Approved: 10/10/11 Approval Signature: [Signature] Approver's Employee #: 647972 Approver's Phone #: 978-905-2139 Pay When Paid: Yes ☒ No ☐					
TOTAL AMOUNT DUE					\$555.16

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

Enterprise Rent-A-Car



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Bill To:

DR00000-00001/00002-T-1000001/0700

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS-COLI*
250 Apollo Drive
Chelmsford MA 01824

RENTAL INFORMATION

Date Out 9/12/11 Date In 9/14/11 6:52A
7:25AM

Renter
COLIN CALLAHAN

AECOM #: 41001

Project #: 60139734

Task #: 0200

Expenditure Type: off-rd Equip

PO # (if applicable):

PO Line # (if applicable):

Amount: \$40.43

Date Approved: 10/10/11

Approval Signature:

Approver's Employee #: 647972

Approver's Phone #: 978-905-2139

Pay When Paid: Yes No ☒

M09130

RENTAL INFORMATION

Color	License No.	Claim #/Policy #/P.O. #
BLACK	476JK8	CALLAHAN
Model	Unit #	Insured
11 PATR	7DBFWC	
Date of Loss	Type of Loss	
Type of Car	Repair Shop	

Rental Agreement

D236287 - 10U8

BILLING DETAIL

Description	Rate	Amount
2 DAYS @	36.00	72.00
PKGSCH		.60
VLCREC FEE		3.50
SALES TX %	6.25	4.76

AECOM #: 41001

Project #: 60214189

Task #: 3

Expenditure Type: off-rd Equip

PO # (if applicable):

PO Line # (if applicable):

Amount: \$40.43

Date Approved: 10/10/11

Approval Signature:

Approver's Employee #: 647972

Approver's Phone #: 978-905-2139

Pay When Paid: Yes No ☒

M09130

AMOUNT DUE 80.86

CONTACT INFORMATION

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

Thank You For Choosing Enterprise

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

Please Return This Portion with Remittance

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*
250 Apollo Drive
Chelmsford MA 01824

Customer#	Rental Agreement	Amount	GPBR
NA10F08	D236287	80.86	10U8

09/20

PALMS

Environmental & Survey
Rentals • Sales • Service

INVOICE

DATE	INVOICE #
10/4/2011	16623

BILL TO:
AECOM
250 Apollo Drive
Chelmsford, MA 01824

SHIP TO:
239 Main Street
Attn: Colin Callahan
Reading, MA

P.O. NUMBER	TERMS	SHIP DATE
601397234	Net 30	6/3/2011

SHIP VIA	PROJECT #	JOB NAME
Palms Truck		

RENTAL DAYS / QTY	DESCRIPTION	COST	EXTENSION
	***** FINAL INVOICE *****		
7	Rental charges for In-Situ Level Troll 700, S/N-105490, from 9/8/11 to 9/16/11 at \$26.25/day Fixed Monthly Discounted Rate for 7 days.	26.25	183.75T
1	Rental charges for In-Situ Rugged Reader, S/N-Blue, from 9/13/11 to 9/13/11 at \$25.00/ONE RATE DAILY for 1 day.	25.00	25.00T
	Sales Tax	6.25%	13.05

AECOM #: 41001
Project #: 60139734
Task #: 0200
Expenditure Type: off-rd Equip
PO # (if applicable):
PO Line # (if applicable):
Amount: \$ 221.80
Date Approved: 10/10/11
Approval Signature:
Approver's Employee #: 047972
Approver's Phone #: 978-705-2139

TOTAL AMOUNT DUE \$221.80

Pay When Paid: Yes ☐ No ☒

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



AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

November 18, 2011

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

AECOM Ref. No.: 60139734-Inv28

**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 October 28, 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 \$4,644. 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:

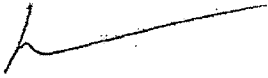
Task 0200 2011 Continued Groundwater Suppression Evaluation Activities

During this invoicing period AECOM performed site close-out activities and continued drafting the annual phytoremediation memorandum. Equipment rental and other direct costs were incurred during this invoicing period. Expenses incurred in September 2011 were also allocated during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in October 2011 associated with this task was \$4,644.

AECOM

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2011 Phytoremediation Program
October 2011 Billing Period

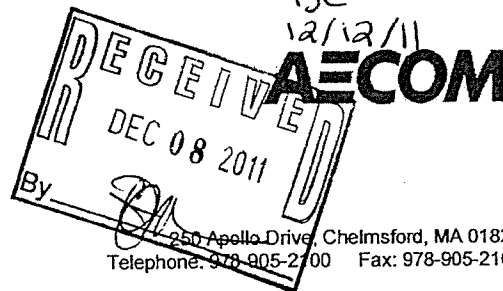
Task		Authorized Budget	2011 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	\$43,700.00	\$9,500.00	\$40,002.36	\$0.00	\$40,002.36	\$3,697.64
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$75,088.84	\$4,644.45	\$79,733.29	\$16,266.71
Total		\$139,700.00	\$38,900.00	\$115,091.20	\$4,644.45	\$119,735.65	\$19,964.35

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

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



Federal Tax ID No.
06-0852759

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

Invoice Date: 30-NOV-11
Invoice Number: 37186633

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
Bill Through Date : 29-OCT-11 to 25-NOV-11

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

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	18-NOV-11	6.00	97.50	585.00
Desai, Maya C	P16	11-NOV-11	0.50	135.00	67.50
Desai, Maya C	P16	18-NOV-11	4.00	135.00	540.00
Gregorio, Helena	P12	11-NOV-11	0.50	97.50	48.75
Kirkwood, Gemma	P13	11-NOV-11	20.25	105.00	2,126.25
Kirkwood, Gemma	P13	18-NOV-11	14.25	105.00	1,496.25
Kirkwood, Gemma	P13	25-NOV-11	1.25	105.00	131.25

Total Labor Bill Rate

46.75

4,995.00

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Rent - Equipment	ENTERPRISE RENT A CAR	22-OCT-11	D236452	94.71	1.0808	102.29

Total Reimbursable

94.71

102.29

Task Total : EVALUATION ACTIVITIE

(7.58)

5,097.29

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

5,097.29

Invoice Summaries

Total Current Amount :	5,097.29	5,097.29
Retention Amount :		0.00
Pre-Tax Amount :		5,097.29
Tax Amount :		0.00

Total Invoice Amount :

5089.71

5,097.29

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	5,097.29	119,736.03	124,833.32		
Billing Total :	5,097.29	119,736.03	124,833.32		

Outstanding Invoices

Invoice Number	Invoice Date	Invoice Balance
37179886	07-NOV-11	4,644.45
37186633	30-NOV-11	5,097.29

Outstanding Total : Accounting: 30:40.00.00.182.29.00 9,741.74

Description: Oct-Nov 2011 Phytoremediation already paid
Project at Rochester, NH MBP

AECOM #: 41001

Project #: 60139734
 Task #: 0200
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 94.71
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 60139734 978
 Task #: 0301
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 60147320
 Task #:
 Expenditure Type: TRA-Car Rental
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 662.94 662.93
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 60212373
 Task #: 0200
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 378.82
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 60194296
 Task #: 3
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 94.71
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 60180323
 Task #: 808
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 94.71
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 60220736
 Task #:
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 60114856 60224856
 Task #: 3
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

AECOM #: 41001

Project #: 6016112
 Task #: 6
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

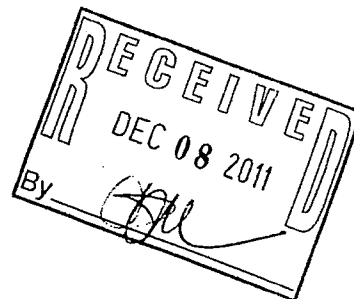


AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

December 2, 2011

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



AECOM Ref. No.: 60139734-Inv29

**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 November 25, 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 \$5,097.29. 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 0200 2011 Continued Groundwater Suppression Evaluation Activities

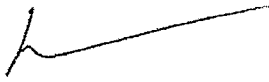
During this invoicing period AECOM completed site close-out activities and continued drafting the annual phytoremediation memorandum. Rental car costs were incurred during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in November 2011 associated with this task was \$5,097.29.

AECOM

2

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2011 Phytoremediation Program
November 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	\$40,002.36	\$0.00	\$40,002.36	\$3,697.64
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$79,733.29	\$5,097.29	\$84,830.58	\$11,169.42
Total		\$139,700.00	\$38,900.00	\$119,735.65	\$5,097.29	\$124,832.94	\$14,867.06

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

DUE 02/06/12

reg 89318

OL

1/23/12

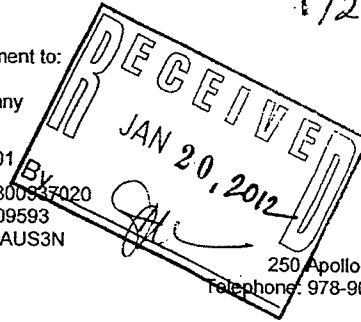
Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago, IL 60674

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

250 Apollo Drive, Chelmsford, MA 01824
Telephone: 978-905-2100 Fax: 978-905-2101

Federal Tax ID No.
06-0852759

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

Invoice Date: 11-JAN-12
Invoice Number: 37199084

Line No.

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Bill Through Date : 26-NOV-11 to 30-DEC-11

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

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	23-DEC-11	5.00	97.50	487.50
Callahan, Colin P	P12	30-DEC-11	2.00	97.50	195.00
Gregorio, Helena	P12	02-DEC-11	0.50	97.50	48.75
Kirkwood, Gemma	P13	16-DEC-11	2.00	105.00	210.00
Vershon, Bruce C	P13	09-DEC-11	3.25	105.00	341.25

Total Labor Bill Rate

12.75 1,282.50

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Rent - Equipment	ENTERPRISE RENT A CAR	22-OCT-11	RCL852583957	66.03	1.0000	66.03

Total Reimbursable

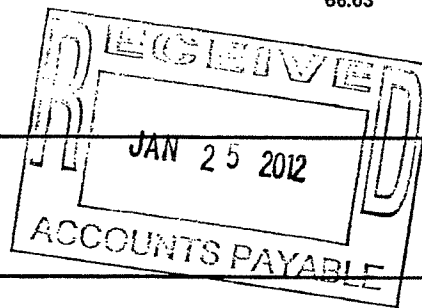
66.03 66.03

Task Total : EVALUATION ACTIVITIE

1,348.53

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

1,348.53



Invoice Summaries

Total Current Amount :	1,348.53
Retention Amount :	0.00
Pre-Tax Amount :	1,348.53
Tax Amount :	0.00

Total Invoice Amount :

Credit for 8% markup (July 1, 2011 through November 25, 2011)

Total amount due this invoice

1,348.53
-244.80
1,103.73

Accounting: 30.40.00.00.182.29.00

Descr: Dec 2011 Activities for Phytoremediation Project at Rochester, NH MBP

Billing Summaries

Billing Summary

Billings

Current

1,348.53

Prior

124,833.32

Total

126,181.85

Limit

Remain

Billing Total :

1,348.53

124,833.32

126,181.85

Rental Invoice



290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

*Short pay
\$58 as

Rental Agreement

0236452 - 10U8

Per Joe
From Enterprise
11/14/11 @ 1500

Bill To:

COLIN CALLAHAN
COLIN CALLAHAN--
250 APOLLO DRIVE
CHELMSFORD MA 01886

RENTAL INFORMATION

Date Out 9/22/11 2:14PM Date In 10/22/11 2:14P
Renter COLIN CALLAHAN

Additional Driver

Name
NONE

RENTAL VEHICLES CLAIM INFORMATION

Color	License No.	Claim #/Policy #/P.O. #
BLACK	FEX5227	CALLAHAN
Model	Unit #	Insured
11 TAHO	7DHTCY	
Color	License No.	Date of Loss
SILVER	827NL4	
Model	Unit #	Type of Car
11 B15Q	7FCTKX	

BILLING DETAIL

Description	Rate	Amount
720 MILES @	.20	144.00
3 DAYS @	65.00	195.00
1 MONTHS @	1,980.00	1,980.00
VLCREC FEE		52.50
PKGSCH		.60
SALES TX %	6.25	148.26

PLS SEE
2nd PAGE

AMOUNT DUE

~~2520.38~~
\$2462.36

IMPORTANT INFORMATION

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

Thank You For Choosing Enterprise

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

Please Return This Portion with Remittance

Remit to:

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

AMOUNT DUE

~~2520.38~~
\$2462.36
2462.36

Paid by:

COLIN CALLAHAN
COLIN CALLAHAN--
250 APOLLO DRIVE
CHELMSFORD MA 01886

10/28

Customer# 999999 Rental Agreement 0236452 Amount 2520.38 GPBR 10U8

AECOM #: 41001

Project #: 60139734
 Task #: 0200
 Expenditure Type: off-rat equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 94.71
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60139734 978
 Task #: 0301
 Expenditure Type: off-rat Equip
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60147320
 Task #:
 Expenditure Type: TRA-Car Rental
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 662.94 662.93
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60212373
 Task #: 0200
 Expenditure Type: off-rat EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 378.82
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60194296
 Task #: 3
 Expenditure Type: off-rat EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 94.71
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60180323
 Task #: 808
 Expenditure Type: off-rat EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 94.71
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60220736
 Task #:
 Expenditure Type: off-rat EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001

Project #: 60114856 60224856
 Task #: 3
 Expenditure Type: off-rat EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒

M09130

AECOM #: 41001
 Project #: 60161121
 Task #: 6
 Expenditure Type: off-rat EQUIP
 PO # (if applicable):
 PO Line # (if applicable):
 Amount: \$ 284.12
 Date Approved: 11/14/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes No ☒



AP TRANSFER OR REVERSAL FORM

- This form is used to transfer, reclass or reverse AP entries made in Oracle.
-Each transfer or reclass requires both a credit and offsetting debit(s) in order to be processed. One form per voucher is required.
-Requests for the transfer or reclass of AP entries require the approval of both the transferring and receiving parties. Email approvals are acceptable and must be submitted with the form.
-Mail completed and approved forms to:
AECOM - SSC AP
4840 Cox Road
Glen Allen, VA 23060
-RUSH Requests should be submitted to the "AECOMSG - A/P Rush Requests" email box for processing.

ENTITY: ACM U.S. DATE: 12- Dec- 11
REQUESTOR NAME: Liz Berube REQUESTOR EMP ID #: 648232
REQUESTOR PHONE #: 978- 905- 2121
(Ext.)

VENDOR NAME: Enterprise VENDOR NUMBER: 1841
INVOICE NUMBER: D236452 VOUCHER NUMBER: 852583957
INVOICE DATE: 22- Oct- 11 PO NUMBER (IF APPLICABLE): _____

Project	Task	Subtask	Expenditure Type	Amount
1 60224856	3		OFF-Rent-Equipment	(\$264.12)
2 60137978	905		OFF-Rent-Equipment	\$66.03
3 60139732	0400		OFF-Rent-Equipment	\$66.03
4 60139734	0200		OFF-Rent-Equipment	\$66.03
5 60146715	1		OFF-Rent-Equipment	\$66.03
6				
7				
8				
9				
10				

Natural GL Account String:

-AND/OR-

1		
2		
3		
4		
5		
6		
Total		\$0.00

Matt Devlin

APPROVER NAME

669364

EMPLOYEE ID #

DATE

Justin Mosquera

APPROVER NAME

647546

EMPLOYEE ID #

DATE



AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

January 16, 2012

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

AECOM Ref. No.: 60139734-Inv30

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 December 30, 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 \$826.08. The original invoice amount was \$1,348.53; however a credit of \$522.45 was applied. The credit was applied for all ODC mark-up charges between July 1, 2010 and November 25, 2011. An ODC mark-up has not been charged for this invoicing period and will not be charged for any remaining 2011 ODC costs to be invoiced in the January 2012 invoicing period. 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:

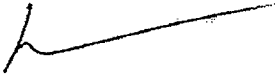
Task 0200 2011 Continued Groundwater Suppression Evaluation Activities

During this invoicing period AECOM continued drafting the annual phytoremediation memorandum. Rental car costs were incurred during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in December 2011 associated with this task was \$1,348.53.

AECOM

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2011 Phytoremediation Program
December 2011 Billing Period

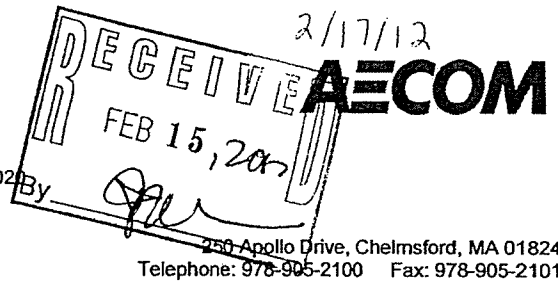
Task		Authorized Budget	2011 Funding	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
0100	Continued Groundwater Suppression Installation Activities	\$43,700.00	\$9,500.00	\$40,002.36	\$0.00	\$40,002.36	\$3,697.64
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$84,830.58	\$1,348.53	\$86,179.11	\$9,820.89
Total		\$139,700.00	\$38,900.00	\$124,832.94	\$1,348.53	\$126,181.47	\$13,518.53

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

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



Federal Tax ID No.
06-0852759

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

Invoice Date: 03-FEB-12
Invoice Number: 37206506

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Bill Through Date : 31-DEC-11 to 03-FEB-12

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

Task Number : 0200

Task Name : EVALUATION ACTIVITIE

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P13	06-JAN-12	1.00	105.00	105.00
Callahan, Colin P	P13	20-JAN-12	2.00	105.00	210.00
Gregorio, Helena	P12	06-JAN-12	0.50	97.50	48.75
Kirkwood, Gemma	P13	06-JAN-12	2.00	105.00	210.00
Kirkwood, Gemma	P13	13-JAN-12	6.50	105.00	682.50
Kirkwood, Gemma	P13	20-JAN-12	1.75	105.00	183.75
Mosquera, Justin L	P17	06-JAN-12	0.50	155.00	77.50
Mosquera, Justin L	P17	13-JAN-12	5.50	155.00	852.50
Mosquera, Justin L	P17	20-JAN-12	6.50	155.00	1,007.50
Mosquera, Justin L	P17	27-JAN-12	-1.50	155.00	-232.50
Tammi, Carl E	P20	20-JAN-12	4.50	190.00	855.00
Vershon, Bruce C	P14	06-JAN-12	0.75	115.00	86.25

Total Labor Bill Rate

30.00 4,086.25

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Mileage	Callahan, Colin P	23-DEC-11	EXP1595432	71.40	1.0000	71.40
Rent - Equipment	ENTERPRISE RENT A CAR	23-NOV-11	D236920	327.17	1.0000	327.17

Total Reimbursable

398.57 398.57

Task Total : EVALUATION ACTIVITIE

4,484.82

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

4,484.82

Invoice Summaries

Total Current Amount :	4,484.82
Retention Amount :	0.00
Pre-Tax Amount :	4,484.82
Tax Amount :	0.00
Total Invoice Amount :	4,484.82

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	4,484.82	126,181.85	130,666.67	139,700.00	9,033.33
Billing Total :	4,484.82	126,181.85	130,666.67		

Outstanding Invoices

Invoice Number

37199084

37206506

Invoice Date

11-JAN-12

03-FEB-12

Invoice Balance

1,348.53

4,484.82

Outstanding Total :

5,833.35

Confirmation

Expense report number EXP1595432 contains policy violations. It has been submitted to Mosquera, Justin L for approval.

Expense Report EXP1595432

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 (847972)	Report Submit Date	29-DEC-2011
Expense Dates	23-DEC-2011 - 23-DEC-2011	Attachments	None
Cost Center (DEPT)	5826	Report Total	71.40 USD
Detailed Business Purpose	Rochester Survey	Reimbursement Amount	71.40 USD
Approver	Mosquera, Justin L		
Receipts Status	Not 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**

Warning	Date	Receipt Expense Amount	Type	Justification Name	Merchant	Receipt Required	Receipt Missing	Attachments	Details	Reimbursable Amount (USD)	Country	Guest's Name	Guest's Title	Organization Name	Business Purpose
⚠	23-Dec-2011	71.40 USD	TRA-Mileage	survey				+		71.40					
Total										71.40					

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

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290 LITTLETON RD UNIT 9
CHELMSFORD MA 01824-3300

Bill To:

NSA-47.000-2/00077-1-1000000000

AECOM INC DBA AECOM ENVIRONMENT
ATTN: CALLAHAN-HIGGINS-COLI•
250 APOLLO DRIVE
CHELMSFORD MA 01824

RENTAL INFORMATION

Date Out	Date In
10/22/11 2:20PM	11/23/11 2:45P

Renter
COLIN CALLAHAN

Additional Driver

Name
NONE

RENTAL VEHICLES CLAIM INFORMATION

Color	License No.	Claim #/Policy #/P.O. #	
SILVER	827NL4	CALLAHAN	
Model	Unit #	Insured	
11 B15Q	7FCTKX		
		Date of Loss	Type of Loss
		Type of Car	Repair Shop

Rental Agreement

0236920 - 10U8

BILLING DETAIL

Description	Rate	Amount
2 DAYS @	65.00	130.00
1 MONTHS @	1,430.00	1,430.00
VLCREC FEE		56.00
PKGSCH		.60
SALES TX %	6.25	101.04

SEE
2nd
PAGE

Only a portion of the charges apply to this project - see next page.

AMOUNT DUE 1717.64

IMPORTANT INFORMATION

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

Thank You For Choosing Enterprise

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

Please Return This Portion with Remittance**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-
250 APOLLO DRIVE
CHELMSFORD MA 01824

11/30

Customer#	Rental Agreement	Amount	GPBR
999999	D236920	1717.64	10U8

AECOM #: 41001

Project #: 60139734
 Task #: 0400
 Expenditure Type: off-rw Equip
 PO # (if applicable): -
 PO Line # (if applicable): -
 Amount: \$ 327.17
 Date Approved: 12/29/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes - No X

Only this charge applies to the
project.

AECOM #: 41001

Project #: 60139732
 Task #: 0400
 Expenditure Type: off-rw Equip
 PO # (if applicable): -
 PO Line # (if applicable): -
 Amount: \$ 163.59
 Date Approved: 12/29/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes - No X

MOB130

AECOM #: 41001

Project #: 60225551
 Task #: 3
 Expenditure Type: off-rw Equip
 PO # (if applicable): -
 PO Line # (if applicable): -
 Amount: \$ 245.38
 Date Approved: 12/29/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes - No X

MOB130

AECOM #: 41001

Project #: 60147320
 Task #: -
 Expenditure Type: TRA - Car Rental
 PO # (if applicable): -
 PO Line # (if applicable): -
 Amount: \$ 490.75
 Date Approved: 12/29/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes - No X

MOB130

AECOM #: 41001

Project #: 60137978
 Task #: 940 700
 Expenditure Type: off-rw Equip
 PO # (if applicable): -
 PO Line # (if applicable): -
 Amount: \$ 81.79
 Date Approved: 12/29/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes - No X

MOB130

AECOM #: 41001

Project #: 60137978
 Task #: 101
 Expenditure Type: off-rw Equip
 PO # (if applicable): -
 PO Line # (if applicable): -
 Amount: \$ 163.58
 Date Approved: 12/29/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes - No X

MOB130

AECOM #: 41001

Project #: 60238327
 Task #: 4
 Expenditure Type: off-rw Equip
 PO # (if applicable): -
 PO Line # (if applicable): -
 Amount: \$ 245.38
 Date Approved: 12/29/11
 Approval Signature: [Signature]
 Approver's Employee #: 647972
 Approver's Phone #: 978-905-2139
 Pay When Paid: Yes - No X

MOB130

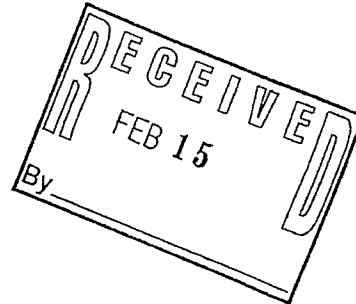


AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

February 6, 2012

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



AECOM Ref. No.: 60139734-Inv31

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 February 3, 2012

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 \$4,484.82. 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 0200 2011 Continued Groundwater Suppression Evaluation Activities

During this invoicing period AECOM completed the annual phytoremediation memorandum and submitted it to NH DES Waste Management Division as an attachment to the 2011 Annual Water Quality Report and Second Semiannual Groundwater Data Submittal. Rental car costs and other vehicle costs were incurred during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in January 2012 associated with this task was \$4,484.82.

AECOM

2

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2011 Phytoremediation Program
January 2012 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	\$40,002.36	\$0.00	\$40,002.36	\$3,697.64
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$86,179.11	\$4,484.82	\$90,663.93	\$5,336.07
Total		\$139,700.00	\$38,900.00	\$126,181.47	\$4,484.82	\$130,666.29	\$9,033.71

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

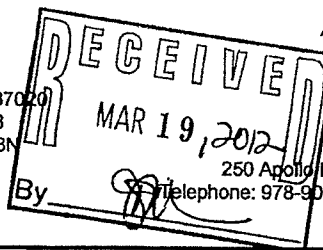
Check Payment to:
AECOM Inc.
An AECOM Company
1178 Paysphere Circle
Chicago, IL 60674

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

DOE 04/02/12
PO 65191
DL 3/20/12

AECOM



250 Apollo Drive, Chelmsford, MA 01824
Telephone: 978-905-2100 Fax: 978-905-2101

Federal Tax ID No.
06-0852759

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

Invoice Date: 28-FEB-12
Invoice Number: 37213869

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Bill Through Date : 04-FEB-12 to 24-FEB-12

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

Task Number : 0200

Task Name : EVALUATION ACTIVITIE

Labor Bill Rate					
Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Gregorio, Helena	P12	✓03-FEB-12	1.25	97.50	121.88
Gregorio, Helena	P12	✓24-FEB-12	0.50	97.50	48.75
Mosquera, Justin L	P17	✓03-FEB-12	3.75	155.00	581.25
Mosquera, Justin L	P17	✓10-FEB-12	1.50	155.00	232.50
Tammi, Carl E	P20	✓10-FEB-12	0.50	190.00	95.00

Total Labor Bill Rate

7.50

1,079.38

Task Total : EVALUATION ACTIVITIE

1,079.38

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

1,079.38

Invoice Summaries

Total Current Amount :	1,079.38
Retention Amount :	0.00
Pre-Tax Amount :	1,079.38
Tax Amount :	0.00

Total Invoice Amount :

1,079.38

Billing Summaries

Billing Summary	Current	Prior	Total	Limit	Remain
Billings	1,079.38	130,421.87	131,501.25	139,700.00	8,198.75
Billing Total :	1,079.38	130,421.87	131,501.25		

Outstanding Invoices

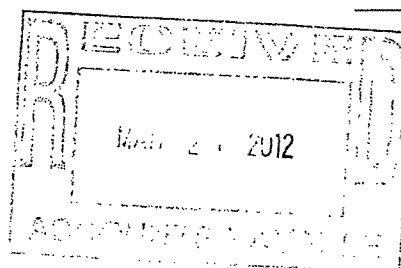
Invoice Number	Invoice Date	Invoice Balance
37206506	03-FEB-12	4,484.82
37213869	28-FEB-12	1,079.38

Outstanding Total :

5,564.20

PO 65191

30.40.00 - 00.182.29.00



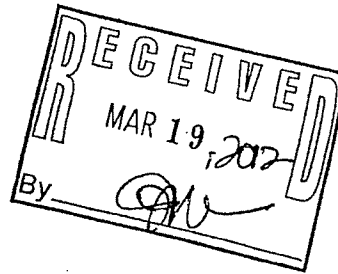


AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

March 7, 2012

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



AECOM Ref. No.: 60139734-Inv32

**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 February 24, 2012**

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 \$1,079.38. 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 0200 2011 Continued Groundwater Suppression Evaluation Activities

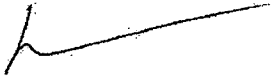
During the January 2012 invoicing period AECOM completed the annual phytoremediation memorandum and submitted it to NH DES Waste Management Division as an attachment to the 2011 Annual Water Quality Report and Second Semiannual Groundwater Data Submittal. Project management and quality management system documentation activities were performed during this invoicing period. As detailed in Table 1 and the attached invoice, the cost incurred in February 2012 associated with this task was \$1,079.38.

AECOM

2

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2011 Phytoremediation Program
February 2012 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	\$40,002.36	\$0.00	\$40,002.36	\$3,697.64
0200	Continued Groundwater Suppression Evaluation Activities	\$96,000.00	\$29,400.00	\$90,663.93	\$1,079.38	\$91,743.31	\$4,256.69
Total		\$139,700.00	\$38,900.00	\$130,666.29	\$1,079.38	\$131,745.67	\$7,954.33

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900.

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

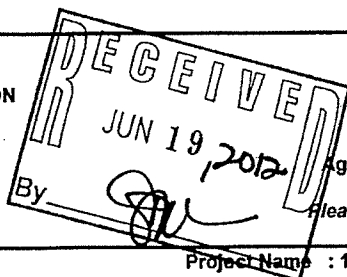
Wire Transfer Payment to:
AECOM Inc.
An AECOM Company
Bank of America
New York, NY 10001
Account Number 5800937020
ABA Number 026009593
SWIFT CODE BOFAUS3N

AECOM

250 Apollo Drive, Chelmsford, MA 01824
Telephone: 978-905-2100 Fax: 978-905-2101

Federal Tax ID No.
06-0852759

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



Invoice Date: 11-JUN-12
Invoice Number: 37245413

Agreement Number: EM13046004
Agreement Description: 1/30/09 TAR NO. 1-19

Please reference Invoice Number and Project Number with Remittance

Project Number : 60139734
Bill Through Date : 25-FEB-12 to 25-MAY-12

Project Name : 13046004 2010 PHYTOREMEDIATION PROGRAM

Task Number : 0200

Task Name : EVALUATION ACTIVITIE

Labor Bill Rate

Employee Name/Title	Title/Expenditure	Date	Hours	Bill Rate	Billed Amt
Callahan, Colin P	P13	18-MAY-12	15.00	105.00	1,575.00
Callahan, Colin P	P13	25-MAY-12	5.00	105.00	525.00
Gregorio, Helena	P12	02-MAR-12	0.50	97.50	48.75
Gregorio, Helena	P12	30-MAR-12	0.75	97.50	73.13
Gregorio, Helena	P12	25-MAY-12	0.50	97.50	48.75
Harrison, Theresa A (Terri)	P12	18-MAY-12	1.00	97.50	97.50
Hencir, Gregory M	P13	25-MAY-12	4.50	105.00	472.50
Kirkwood, Gemma	P13	04-MAY-12	1.50	105.00	157.50
Mosquera, Justin L	P17	30-MAR-12	1.50	155.00	232.50
Mosquera, Justin L	P17	04-MAY-12	11.25	155.00	1,743.75
Mosquera, Justin L	P17	11-MAY-12	5.50	155.00	852.50
Mosquera, Justin L	P17	18-MAY-12	6.75	155.00	1,046.25
Mosquera, Justin L	P17	25-MAY-12	2.25	155.00	348.75
Tammi, Carl E	P20	04-MAY-12	1.00	190.00	190.00
Tammi, Carl E	P20	11-MAY-12	2.50	190.00	475.00
Tammi, Carl E	P20	18-MAY-12	5.00	190.00	950.00
Tammi, Carl E	P20	25-MAY-12	2.50	190.00	475.00
Van Naerssen, Kristoffer J	P15	11-MAY-12	0.50	125.00	62.50

Total Labor Bill Rate

67.50

9,374.38

Reimbursable

Expenditure Type	Employee/Vendor Name	Date	Inv Number	Raw Cost	Multiplier	Billed Amt
Lunch	Mosquera, Justin L	04-MAY-12	EXP1763643	13.08	1.0800	14.13
Mileage	Mosquera, Justin L	04-MAY-12	EXP1763643	42.18	1.0000	42.18
Miscellaneous - Allowable	Mosquera, Justin L	02-MAY-12	EXP1763643	281.16	1.0800	303.65
Outside Contractors	ABUNDANT WILDLIFE CONTROL	23-MAY-12	325365	750.00	1.0800	810.00
Outside Contractors	GC AAA FENCES INC	25-MAY-12	0025434	1,850.00	1.0800	1,998.00
Travel All Other	Mosquera, Justin L	04-MAY-12	EXP1763643	5.75	1.0800	6.21

Total Reimbursable

2,942.17

3,174.17

Task Total : EVALUATION ACTIVITIE

12,548.55

Project Total : 13046004 2010 PHYTOREMEDIATION PROGRAM

12,548.55

Invoice Summaries

Total Current Amount :	12,548.55
Retention Amount :	0.00
Pre-Tax Amount :	12,548.55
Tax Amount :	0.00

PO 65191-1

30.40.00.00.182.29.00

Invoice Summaries

Total Invoice Amount :

12,548.55

Billing Summaries

Billing Summary

Billings

Current
12,548.55

Prior
131,501.25

Total
144,049.80

Limit
194,041.00

Remain
49,991.20

Billing Total :

12,548.55

131,501.25

144,049.80

OK



GC/AAA FENCE COMPANY 294 DURHAM ROAD
DOVER, N.H. 03820 603-742-0833

INVOICE # 0025434

05/25/2012

BILL TO:

AECOM
C/O THERESA HARRISON
250 APOLLO DR.
CHELMSFORD, MA 01824

SHIP TO:

PO #37988ACM
ROCHESTER, NH

QTY.	RECORD #	ITEM	AMOUNT
1	NONE	REPAIR CHAIN LINK FENCE AND GATE. @ 1850.00 =	1850.00
TOTAL AMOUNT DUE:			\$ 1850.00

AECOM #: 41001

Project #: 60139734
Task #: 0200
Expenditure Type: Sub Professional Services
PO # (if applicable): 37988
PO Line # (if applicable): -
Amount: \$1,850
Date Approved: 5/30/12
Approval Signature: [Signature]
Approver's Employee #: 647546
Approver's Phone #: 978 905 2339
Pay When Paid: Yes ☐ No ☒

M09130

PAYMENT TERMS: DUE IN FULL UPON RECEIPT

Thank you for your business, we hope we can serve you again.

Visit our web site at www.gcaafences.com

INVOICE NO. 325365

INVOICE

ABUNDANT WILDLIFE
PO BOX 338
BARRINGTON NH 03825

603 664-2847

978-631-9002

SERVICES PERFORMED AT		COL LEN (CONTACT)	
ADDRESS		3260 VIC RD	
CITY, STATE, ZIP		NH 03064	
CUSTOMER'S ORDER #		978-631-9002	
SALES PERSON		(FISHING) DATE	
TERMS		150 - 150	

Beaver Insp.

Beaver Job #1,500 -
LIVE SHOULD CAUGHT AT LEAST
one
I would start 1/2 DOWN
NO MORE THAN 10 DAYS TRAPPING

AECOM # 41001	
Project #	60139734
Task #	0200
Expenditure Type	CDN Subcontractors
PO # (if applicable)	-
PO Line # (if applicable)	-
Amount	4750.00
Date Approved	5-23-12
Approval Signature	Edmund
Approver's Employee #	618232
Approver's Phone #	978-985-2121
Pay When Paid	Yes ☐ No ☒ X
No X rush request	

5. Confirmation

Expense report number EXP1763643 for 337.79 has been submitted to Tammi, Carl E for approval.

Expense Report EXP1763643

TIP: For more information on how to use the Expense Report system, click on the "Help" link in the top right corner of the 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.

• Both the "Expense Lines" Tab and "Expense Allocations" Tab pages need to be printed.

• Print and sign the Expense 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 visit the Expense homepage and view the information under the "Track Submitted Expense Reports" region.

General Information

Employee Name Mosquera, Justin L (647548)
Expense Dates 02-MAY-2012 - 04-MAY-2012
Cost Center (DEPT) 6828
Detailed Business Purpose Phyto Eval
Approver Tammi, Carl E
Receipts Status Required

Report Submit Date 04-MAY-2012
Attachments View
Report Total 337.79 USD
Reimbursement Amount 337.79 USD

342.17

Mileage rate increased to 0.555 per mile

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

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

Business Expenses

Cash Expenses

Date	Receipt Expense Amount Type	Merchant Name	Receipt Required	Receipt Mismatch	Receipt Attachment Details	Reimbursable Amount (USD)	Guest's Country Name	Guest's Organization Name	Guest's Business Purpose
02-May-2012	281.18 MISC-USD Miscellaneous	Phyto Eval				281.18			
04-May-2012	37.80 TRA-Mileage USD	Phyto Eval				42.18		76 Miles	
04-May-2012	13.08 TRA-Lunch USD	Phyto Eval				13.08			
04-May-2012	5.75 TRA-Travel USD All Other	Phyto Eval				5.75			
Total						337.79			
						342.17			

Expense Lines Expense Allocations Weekly Summary Approval Notes [0]

Copyright (c) 2008, Oracle. All rights reserved.

Business Purpose

US Dollar

Employee Name

Employee Signature

Supervisor Approval

Use green excel commands ONLY:
 a. Copy + C - To copy the cell value
 b. Paste + V - To paste the cell value
 c. Copy + E - To prepare the spreadsheet for report
 d. Copy + E - To prepare the spreadsheet for report
 e. Do NOT use red and paste excel commands (do not use Ctrl X)
 f. If the Area below reads EPLOR please contact B
 g. Shared area - Protected or Redaction
 h. Red - Required/Notified to be Updated
 Please Note:

Line No.	Date Of Expense (mm/dd/yyyy)	Project No.	Task Number	Justification	Receipts Attached	Curr	Exchange Rate (Foreign to US\$)	From	To	# Of Miles	\$ Of Miles	Personal Auto	Transportation	Lodging Tax (Phone, City, Etc.)	Breakfast	Lunch	Dinner
1						USD					37.80						
2						USD					0.00						
3						USD					0.00						
4						USD					0.00						
5						USD					0.00						
6						USD					0.00						
7						USD					0.00						
8						USD					0.00						
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97						USD					0.00						
98						USD					0.00						
99						USD					0.00						
100						USD					0.00						

COMPANY PAID EXPENSES

42.18

ATCOM EMPLOYEE EXPENSE REPORT

to AMS Help Desk / (844) 822-AMS

Employee No.
Employee Name

117148
JAMES M. MCLEOD

Line No.	Total Meals (Excluding Alcohol)	Other						Others Amount	Total	Business Meetings			
		Alcohol	Entertainment	Business Meetings	Parking	Phone / Cell / Fax	All Others			Guests Name	Guests Title	Organization Name	Business Purpose
1	0.00						MISC-Miscellaneous	24.13	24.13				
2	13.08						TRV-Travel All Other	56.83	69.91				
3	0.00						Select Expenditure Type	0.00	0.00				
4	0.00						Select Expenditure Type	0.00	0.00				
5	0.00						Select Expenditure Type	0.00	0.00				
6	0.00						Select Expenditure Type	0.00	0.00				
7	0.00						Select Expenditure Type	0.00	0.00				
8	0.00						Select Expenditure Type	0.00	0.00				
9	0.00						Select Expenditure Type	0.00	0.00				
10	0.00						Select Expenditure Type	0.00	0.00				
11	0.00						Select Expenditure Type	0.00	0.00				
12	0.00						Select Expenditure Type	0.00	0.00				
13	0.00						Select Expenditure Type	0.00	0.00				
14	0.00						Select Expenditure Type	0.00	0.00				
15	0.00						Select Expenditure Type	0.00	0.00				
16	0.00						Select Expenditure Type	0.00	0.00				
17	0.00						Select Expenditure Type	0.00	0.00				
18	0.00						Select Expenditure Type	0.00	0.00				
19	0.00						Select Expenditure Type	0.00	0.00				
20	0.00						Select Expenditure Type	0.00	0.00				
21	0.00						Select Expenditure Type	0.00	0.00				
22	0.00						Select Expenditure Type	0.00	0.00				
23	0.00						Select Expenditure Type	0.00	0.00				
24	0.00						Select Expenditure Type	0.00	0.00				
25	0.00						Select Expenditure Type	0.00	0.00				
Total	13.08	0.00	0.00	0.00	0.00	0.00		286.91	337.78				

342.17

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

EZ pass
 Spauldy Turnpike NH
 5/4/12
 \$0.75
 \$0.75
 \$0.75
 \$0.75
 \$0.75
 Rate 95 NH
 \$2.00
 \$0.75
 X / ~~647546~~

12345678901234567890
 VISA
 Entry Method: Sailed
 Total: \$ 13.00
 05/04/12 11:30:06
 Inv#: 000001 Appr Code: 03508C
 Batch#: 000002
 Approved: Online
 Customer Copy
 THANK YOU!
 COME AGAIN!

Sale
 Merchant ID: 55005130471501
 800-332-1193
 12 GALTIC ROAD
 ROCHESTER NH 03067



P.O. Box 538
45 Russell Road
East Granby, CT 06026
PH: 860-844-0101

Invoice

DATE	INVOICE #
5/2/2012	102863

SHIP TO
AE Com Attn: Justin Mosquera 250 Apollo Dr Chelmsford, MA 01824

BILL TO
Justin Mosquera 88 Ferry Rd Newburyport, MA 01950



PAID

Approval code	WCS P.O. #	Deliver Via	Terms	Rep/Verify/Packed by	Cust. Order#	
05535C	stock	STANDARD	VISA	MHN	Justin	
ITEM CODE	DESCRIPTION			QTY	PRICE EACH	AMOUNT
WCSYD	Yote ' Coyote Decoy-3-D (great for calling coyote or scaring birds such as geese)			4	38.95	155.80
80035-5lb	Shake-Away DEER (Powder Coyote Urine) - 5 lb			3	29.95	89.85
Shipping	05/02/2012 1Z48A8V30353617234, 1Z48A8V30354238848				35.51	35.51
IN PROCESS				Total (U.S.D.)		\$281.16

OPEN & INSPECT UPON RECEIPT. CALL IMMEDIATELY IF ITEMS ARE DAMAGED. Original box & packing material must be kept with items to arrange refund or replacement. To arrange Returns, call 860-844-0101. Returns must be requested & items returned within 30 days of purchase. Items must be returned in original Packaging. A 20% restocking fee will be deducted on Returns. Shipping is non-refundable. Only product cost will be credited. Baits, Lures, Pyrotechnics and Reference Materials are not returnable. REMIT PAYMENT TO: WCS PO Box 538 East Granby, CT 06026

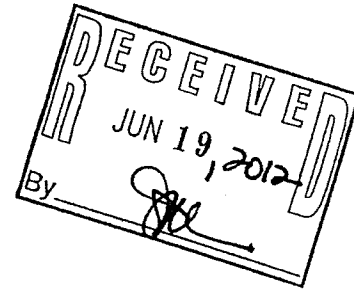


AECOM
250 Apollo Drive
Chelmsford, MA 01824

978.905.2100 tel
978.905.2101 fax

June 13, 2012

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



AECOM Ref. No.: 60139734-Inv33

RE: Invoice for Activities Related to 2012 Phytoremediation Program
Petrolane/Northern Utilities, Inc. Site (DES #198712002, Project #432)
32 Gonic Road, Rochester, NH
AECOM Project #60139734
Period Ending May 25, 2012

Dear Mr. Murphy:

Enclosed for your information is an invoice and Progress Report for professional environmental consulting services related to the 2012 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 \$12,548. The total authorized budget for this project for the 2012 calendar year is \$54,341. AECOM's December 12, 2011 Proposal for \$9,400 to continue groundwater suppression installation work in 2012 was approved by Unitil on March 20, 2012 under Purchase Order NU 65191-1. The approved proposal included inspection of the phytoremediation stands (phyto stands) for grazing, infestation and plant disease and carried subcontracted and/or material costs of \$1,000 for minor issues. An area of the most recently planted phyto stand (Stage II) was compromised by a beaver(s) earlier in this invoicing period. As such, AECOM proposed means to eliminate future beaver tree kills and to re-develop and irrigate the compromised area of the phyto stand. The second 2012 for \$44,941 proposal was submitted on May 14, 2012 and approved by Unitil on May 16, 2012. 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 0200 2012 Continued Groundwater Suppression Evaluation Activities

As summarized in e-mails from Justin Mosquera dated May 2nd and May 4th 2012, an area of the most recently planted phyto stand (Stage II) was compromised by a beaver(s). AECOM took measures in the short term to prevent further loss of trees in the phyto stands. These activities included immediate blockage of the compromised area of the perimeter fence, subcontracted perimeter fence repairs, and installation of coyote figures. Desktop activities also included coordination with New Hampshire Fish and Game to understand the rules and regulations for

AECOM

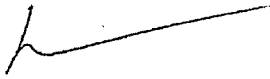
2

beaver trapping/relocation in New Hampshire, solicitation of quotes for beaver trapping/relocation and development of a plan to re-establish the compromised portion of the phyto stands. A health and safety plan to facilitate hazards specific to these activities was also developed.

Subcontracted perimeter fence repairs included sewing areas of the perimeter fence where erosion or tunneling by rodents has been observed, general repairs to the three gates and re-setting of the top-rail where trees have fallen. AECOM provided oversight, cleared woody debris on the top-rails and contracted GC AAA Fences Inc. of Dover, New Hampshire to perform fence repairs.

If you have any questions regarding this invoice, please do not hesitate to call me at 978-905-2339. 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
2012 Phytoremediation Program
May 2012 Billing Period

	Task	Authorized Budget	Previously Invoiced	Current Invoice	Total Invoiced	Remaining Budget
100	Previously Authorized Funding (2009 - 2011)	\$139,700.00	\$131,745.67	\$0.00	\$131,745.67	\$7,954.33
200	Continued Groundwater Suppression Installation Activities (2012 Funding)	\$54,341.00	\$0.00	\$12,548.55	\$12,548.55	\$41,792.45
Total		\$54,341.00	\$0.00	\$12,548.55	\$12,548.55	\$41,792.45

2009 Phyto Funding \$51,300, 2010 Phyto Funding \$49,500, 2011 Phyto Funding \$38,900, 2012 Phyto funding \$9,400+\$44,941.

✕ Detach and return the above portion with your payment ✕



City of Rochester
Rochester, New Hampshire

PD 63880

WATER & SEWER BILL

Customer Copy

Keep this portion for your records

Customer NORTHERN UTILITIES INC		Service Address 32 GONIC RD /PETROLANE				
Bill Number 13794946	Account Number 152340		Past Due Date 08/19/2011		Bill Date 07/19/2011	
Description COMM WATER TURN ON NH OK JHE blanket	Read Date		Meter Readings		Usage in 100-cu. feet	Charge
	Current 07/14/2011 07/15/2011	Previous 05/10/2011 04/01/2011	Current	Previous		
		AUG - 4 2011		RECEIVED JUL 20 2011		
Last Payment Amt 30.00	Last Payment Date 02/14/2011	Past Due 0.00	Other Current Charges .00	Current Charges 46.31	Amount Due \$46.31	

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.

✕ Detach and return the above portion with your payment ✕



City of Rochester
Rochester, New Hampshire

PO 63880

WATER & SEWER BILL

Customer Copy

Keep this portion for your records

Customer NORTHERN UTILITIES INC		Service Address 32 GONIC RD /PETROLANE			
Bill Number 13802240	Account Number 152340	Past Due Date 11/28/2011	Bill Date 10/25/2011		
Description COMM WATER TURN OFF NH OK JHE blanket	Read Date		Meter Readings	Usage in 100 cu. feet 1	Charge 17.07 30.00
	Current 10/17/2011 10/21/2011	Previous 07/14/2011	Current 1		
Last Payment Amt 46.31	Last Payment Date 08/15/2011	Past Due 0.00	Other Current Charges .00	Current Charges 47.07	Amount Due \$47.07

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
EFF 8/1/11: WATER \$4.49, ELDERLY \$1.94, MIN \$17.07, MIN ELD \$13.67
SEWER \$6.11, ELDERLY \$4.06, MIN \$29.21, MIN ELD \$23.25

BILL IS DUE UPON PRESENTATION

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Attachment 3C
Somersworth Invoices

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Attachment 3D
Dover Invoices

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Attachment 3E
Portsmouth Invoices

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Contracting Project Manager

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3rd Party Recovery

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