

## INVOICE Pace Analytical Services,LLC 41-1821617

Pace Analytical Services,LLC 8 Walkup Drive Westborough,MA 01581 Phone:508-898-9220

Invoice Number: 2458875677
Invoice Date: 20-SEP-24

Report Due: 19-SEP-24

Account Number: MEDEP-AUGUST Receive Date: 12-SEP-24

Invoice To:

Accounts Payable

Maine Department Of Env Protection

17 State House Station Augusta, ME 04333

Alpha Job #: L2452423

Ouote #:

Payment Terms: Net 30 P.O. Number: REM02

Report To:

Ms. Molly King

Maine Department Of Env Protection

17 State House Station Augusta, ME 04333

Project Number: 83336 Alpha Contact: Michael Chang Site: NASB-HANGER 4 AFFF Project Manager: Ms. Molly King

Matrix	Description	Unit Price	Quantity	Total Price		
WATER WATER LINE ITEM LINE ITEM	PFAAs via LCMSMS-Isotope Dilution 75% Rush Surcharge VC1000070011 CTB#20240611*3672	199.00 149.25	1 1	199.00 149.25 0.00 0.00		

Total Amount Due: \$ 348.25

Page 1

Payments should be made via ACH(electronic) transfer on or before due date. If you are not enrolled in our electronic payments program please contact us at ARQuestions@Pacelabs.com or call 612-607-6400. If you do not have access to pay Pace via ACH or wire transfer you may remit payment to the address below. Please include invoice number/s on your remittance.

Pace Analytical Services, LLC P.O. Box 684056 Chicago, IL 60695-4056

B Walkup Drive Westboro, MA 01581 508)-898-9220	320 Forbes Blvd Marofield, MA 02045 Tel: Tel: [508] 822-9300	Project Information Project: NASB-Hanger 4 AFFF						Date Rec'd in Lab:  9/12/24  Report Information - Data Deliverables  ☑ EMAIL ☑ ADEx							ALPHA Job #: REM02 L2452 Billing Informs	42 ation	
Client Information	Market Land								EMAIL MADEX						Same PO as Client info	#:	
Client Maine Dean			Town: Brunswick						PFAS 537 Please Report Full compound list						Inno I		
	rtment of Environmental Protection	EGAD No	EGAD Number: 83336						Black								
Contact Name: Molly King		Project Ma	Project Manager: Molly King							ise pro	vide EDI	) for PF	AS				
ity: Augusta		Copies to:	becky.blais@	gmaine.go	v, finn,whiting	@maine.gov,	1		+								
tate: Maine	Zip Code: 04333	ALPHA Qu	od@maine.go ote #:	ov													
hone: 207-458-883	9	Turn-Arou	Turn-Around Time														
mail: molly.king@r	naine gov	, Standard		only confirm	ed if pre-appro	ved)											
Additional Project Information: Please send copy of EDD with			Date Due:							ANALYSIS							
OLE SAMPLE NAME	NG SHOULD BE ADDRESS WHER	vith results. RE SAMPLE IS	COLLECTE	D					7 Mod							SAMPLE INFO Filtration ☐ Field ☐ Lab to do	BOTTLES
ALPHA Lab ID (Lab Use Only)	Sample Point Name (Sample Address)	Matrix		Sample Matrix/ Type	Location	SET TO SET OF SET OF SECURITY	Treatment Status	PID Result	S Method 537 Mod					Preservation  Lab to do	TOTAL # BC		
52423-01	5 paradise Ln	9/11	1543	GW	~~			-	PFAS N Isatope			_				Sample Comments	TOTAL
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## One O=Other ### O=Other ####################################		À	Container Type:						Р	Р		$\Box$		+		All samples	100
		Relinquished	elinguisped 6 Date/Time						A 0 Pate/Time:						submitted are sub to Alpha's Terms a	and	
cteria cup. F=Med	Cube G=NeHSO4 Other H=NA25203 Encore I-Ascorbic Acid D=Sottle J=N646CL		9/11/24 1800					Date/Time: 13:30				ime:	Conditions. See reverse side.				
acteria cup. F=Met Uber G=Nat Ther H=NA; Incore I-Asco	rbic Acid	18 V	6	9/12		00			Ulean	man I	Appen.	2000		-	-	14000	1