

INVOICE Pace Analytical Services,LLC 41-1821617

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

Invoice Number: 2458884116

Invoice Date: 29-OCT-24

Report Due: 24-OCT-24
Account Number: MEDEP-AUGUST
Receive Date: 10-OCT-24

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

Alpha Job #: L2458958

Invoice To:

Accounts Payable

Maine Department Of Env Protection

17 State House Station Augusta, ME 04333

Report To:

Ms. Molly King Maine Department Of Env Protection

17 State House Station Augusta, ME 04333

Project Number:

Site:

Location:

83336

NASB-HANGER 4 AFFF

BRUNSWICK

Alpha Contact: Michael Chang Project Manager: Ms. Molly King

Matrix	Description	Unit Price	Quantity	Total Price	
WATER LINE ITEM LINE ITEM	ME PFAAs via EPA 1633 VC1000070011 CTB#20240611*3672	400.00	6 :	2400.00	

Total Amount Due: \$ 2400.00

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.

Д ІРНА	CHAIN OF CU	STODY	PA	GE	1	OF	1		The Control of the Co	16/2		124	589	58	ALPHA Job REM02	#:
8 Walkup Drive estboro, MA 01581 89-898-9220	320 Forbes Blvd Mansfield, MA 02048 Tel: Fel: (508)-822-9300	Project: Information Project: NASB-Hanger 4 AFFF					Report Information - Data Deliverables ☑ EMAIL ☑ ADEx					Billing Infor Same F as Client info	rmation PO#:			
Client Information Town: Brunswick						PFAS	1633 Ple	ease Rep	oort Full	compoun	d list	1				
lient: Maine Departm	ent of Environmental Protection	EGAD Number: 83336					Pleas	e provid	e EDD fo	or PFAS						
ontact Name: Molly K	ling	Project Manager: Molly King														
ity: Augusta		Copies to: fin	n_whiting@n	naine.gov,	iver.j.mcleod	@maine.gov										
tate: Maine	Zip Code: 04333 ALPHA Quote #:															
Phone: 207-458-8839		Turn-Aroun		only confirm	ed if pre-appro	wed\		3813	1							
email: molly.king@maine.gov		☑ Standard □ Rush (only confirmed if pre-approved) Date Due:					ANALYSIS									
or unknown source.	mation: Please send copy of EDD wi G SHOULD BE SW-##-2024MMDD		site is asso	ciated with	a sludge	utilization, or	septage spr	read,	1633						SAMPLE IN Filtration Field Lab to d	io de la constante de la const
ALPHA Lab ID (Lab Use Only) Sample Point Name (Sample Address)			6.6 - 6-51	Sample Location	466 446 456 456	Treatment Status	PID Result	Po						Preservation Lab to de		
8958 - ol	SW-66-2024 10 0 G	10/09	1540	SW	0	GS	N	NA	X				\neg	T	Comments	2
-02	SW-65-2024 1009	10/04		SW	0	GS	N	NA	х					\Box		-3
-03	SW-23-2024 10 09	16/09	1620	SW	0	GS	N	NA.	Х							:
-04	SW-17-2024 1609	10/09	1635	SW	0	GS	N	NA	х							3
205	SW-11-2024\009	10/09	1650	SW	0	GS	N	NA	х	\sqcup	_	\perp	_	\perp		3
-06	Field Blank	10/09	1700	AQ	0	NA	NA	NA	X	\vdash	_	+	-	+		3
									-		+	+	_	+		+
		_		-	-			-		\vdash	+	++	+	+		+
			-	-	-			-	+	\vdash	-	++	+	+	_	+
A=t	sservative None O=Other HCL HN03 HCSO4 NAOH	Relinquian		Container T	e:	1800			P A Receiv	P O ed By:	meh	<u> </u>		Date/		re subje erms ar
AnAmber Glass C=1 VrVial D=1 G=Glass E=1 B=Bacteria cup F=1	MeCH NaHSO4	K	4	1 01	in the state of th	13:45									10=21 46/	