| Excluded Recyclable Material Manifest   | 1. Project Number 2. Document Number |                   |                          |  |                |        |                       |     | 3. Date                            |
|---|--------------------------------------|-------------------|--------------------------|--|----------------|--------|-----------------------|-----|------------------------------------|
| 4. Generator's Name and Mailing Address  5. Generator's Phone   |                                      |                   |                          |  |                |        |                       |     |                                    |
| 6. Transporter 1 Company Name 7. 1  |                                      |                   |                          |  |                | 7. Tra | Transporter's Phone   |     |                                    |
| 8. Transporter 2 Company Name 9. 1  |                                      |                   |                          |  |                | 9. Tra | Transporter's Phone   |     |                                    |
| 10. US DOT Proper Shipping Name   |                                      |                   | 11. Containers  No. Type |  | Total Quantity |        | 13. Unit, \<br>Volume |     | Recycled Pursuant<br>o HSC 25143.2 |
| A.  |                                      |                   |                          |  |                |        |                       |     |                                    |
| В.  |                                      |                   |                          |  |                |        |                       |     |                                    |
| C.  |                                      |                   |                          |  |                |        |                       |     |                                    |
| D.  |                                      |                   |                          |  |                |        |                       |     |                                    |
| 14. Recycling Facility Name and Mailing Address   |                                      |                   |                          |  |                | 1      | 15. Facility Phone    |     |                                    |
| 16. Additional Description for Material Listed Above  |                                      |                   |                          |  |                |        |                       |     |                                    |
| 17. Special Handling Instructions   |                                      |                   |                          |  |                |        |                       |     |                                    |
| 18. Generators Certification: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, labeled and are in all respects in proper condition for transport according to applicable international and domestic regulations.  I also recognize that in spite of product name or appearance, these commodities are being recycled and are either non-hazardous or conditionally exempt from hazardous waste regulations. As the generator, I am making a good faith effort to minimize my waste and am taking advantage of new technology and existing DTSC regulations to comply with SB 14 requirements by selecting the best methods that are available to me and that are economically practical. |                                      |                   |                          |  |                |        |                       |     |                                    |
| Generator or Authorized Representi  | tve / Print Name                     | Signature         |                          |  |                | ٨      | Month I               | Day | Year                               |
| 19. Transporter 1 Acknowldgement of Receipt of Materials  |                                      |                   |                          |  |                |        |                       |     |                                    |
| Print / Type Name   |                                      | Signature         |                          |  |                | ٨      | Month I               | Day | Year                               |
| 20. Transporter 2 Acknowldgement of Receipt of Materials  |                                      |                   |                          |  |                |        |                       |     |                                    |
| Print / Type Name   |                                      | Print / Type Name |                          |  |                | N      | Month I               | Day | Year                               |
| 21. Discrepancy Indication Section  |                                      |                   |                          |  |                |        |                       |     |                                    |
| 22. Facility Operator: Certification of Receipt of Exluded Recyclable Materials by this Document except as otherwise noted on line 21   |                                      |                   |                          |  |                |        |                       |     |                                    |
| Print / Type Name   |                                      | Signature         |                          |  |                | ٨      | Month I               | Day | Year                               |