NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION

Lets protect our earth	NEW JERSEY	(DEPARTMENT OF E	NVIRONMENTA	AL PROTECTIO	N INVOICE NO. 012345678		
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		OVERSIGHT CO					
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		e the comment, click the X					
Billing ID #		Type of Notice	Billing Date	Due Date	Amount Due \$ 16,154,32		
E12345	6/8	DIRECT	07/11/07	08/11/07	\$ 16,154.32		
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·····		SF= 0.00	DF= 7,523.50				
CASE INFORMATION ID AND LOCATION		BILLING PERIOD / Case Manager and Lead		SUMMARY OF CHA			
111222333444 123 MAIN ST		02/16/07 TO 05/11/07		\$ 7,523.50	\$ 8,630.82		
123 MAIN ST		UNASSIGNED DRPSR-ISEE-BUST		PAYM	INT PLAN SCHEDULE		
ANYTOWN CITY WARREN					Min.Amount Due		
					\$ 342.00		
MESSAGES:							
REMINDER:	indicates a W	Min.Amount Due" in the	DAVMENT DI AN SCH	EDULE Section	please		
pay the amount s			FAIMENT FLAN SC	EDOLL SECTION,	prease		
		an explanation of the output of this INVOICE with			envelope.		
		Send Billing Inquiries NJDEP	to:		contact directly at: 09)-633-0701 (PHONE)		
		Division of Remediation S		(609)-633-1439 (FAX)			
INVOICE NO.		Fiscal Support Servic PO BOX 413	es				
012345678		Trenton, NJ 08625-04	113		D8501F (R 10/03)		
Letsprotect our earth	NEW JERSE	Y DEPARTMENT OF E	NVIRONMENT	AL PROTECTIO	N OICE NO.		
					012345678		
ATT		SITE REMEDIATION	ON PROGRAI	M			
		OVERSIGHT CO	ST INVOICE				
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85 JOHN DOE & ATTN: JOHN I 123 MAIN ST	SMITH LLP	սիսիկոսիկիսուրորը	and	mail to:	TE OF NEW JERSEY f TREASURY NUE		

Enclosed you will find documents which detail oversight costs incurred by the New Jersey Department of Environmental Protection (Department) at the referenced case. This package contains the following:

COST OVERSIGHT INVOICE

Contains information relative to the case location and billable amount. When making payment, return the bottom portion of this page with your remittance. This document also includes a Change of Mailing Address form.

EXPENDITURE SUMMARY

Contains a summary of the charges incurred by the Department for a case, including a breakdown of direct and indirect salary costs by fiscal year, and total non-salary costs. The calculation of the factors used to determine total salary cost is also provided. These factors are usually defined as follows:

Salary Additive Rate - A percentage of costs applicable to sick time, vacation time and other similar time which cannot be billed to an individual site, and is necessary to insure full compensation of an employee's direct salary.

Fringe Benefit Rate - The Department's contribution for the employee's pension, health benefits, worker's compensation, temporary disability and F.I.C.A. (Federal Insurance Contribution Act).

Indirect Cost Rate - The Department's general operating expenses which cannot be assigned to a specific case, including such costs as building rent, utilities and Department upper management salaries. (Director, Commissioner)

COST ANALYSIS (SALARY)

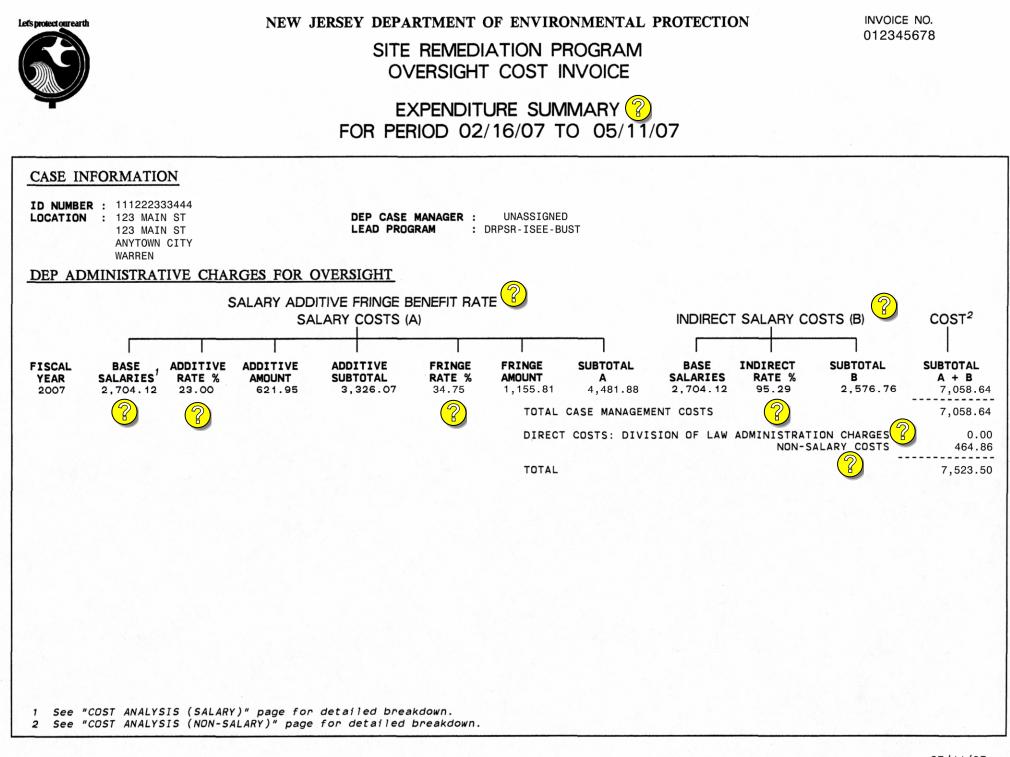
Contains information on the Department's salary charges incurred on the case during the period indicated. This breakdown includes, in part, the individual who charged time to the case, the two week pay period during which the time was charged, a description of the activity performed and the direct salary cost incurred by the Department. This could be multiple pages.

COST ANALYSIS (NON-SALARY)

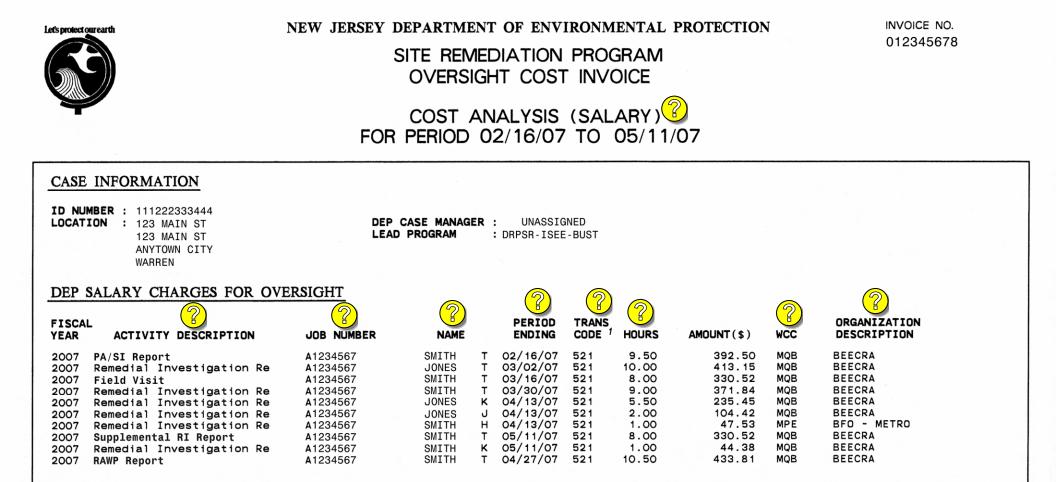
Contains information on the Department's non-salary charges incurred on the case for the period indicated, such as Department sampling and analytical costs, and contractor expenses. As above, this includes the vendor who worked on the case, the date the invoice was paid, a description of the activity performed and non-salary cost incurred by the Department. This could be multiple pages.

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Business or compa	ny Name :					
Care/Attention of	:	Telephone No.:				
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(111110410 0110)	C) Street Address			NO.		
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D8501B (R 10/03)



ISSUE DATE: 07/11/07



1 "DOL" indicates Division of Law salary charges not included in Base Salary.

