



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Charlie Crist  
Governor

Jeff Kottkamp  
Lt. Governor

Michael W. Sole  
Secretary

December 20, 2007

Mr. Phil Novomestky  
Oldcastle Coastal, Incorporated  
12019 State Road 54  
Odessa, Florida 33556

Dear Mr. Novomestky:

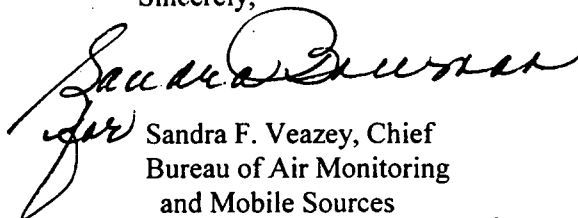
This is to acknowledge that your notification of intent to use the authority of Rule 62-210.310 to operate your facility was received on November 14, 2007. We have assigned ARMS Number 1010504-001 to this facility.

As you know, pursuant to Florida Statutes section 403.814, authority to operate under general permits commences thirty days after receipt of the registration form unless you have been notified by this office that your facility has not shown entitlement to operate pursuant to the rule provisions.

For your information, authority to operate pursuant to Rule 62-210.310 expires after 5 years. Therefore, a new registration form must be received no later than 5 years after the date your notice was received as indicated above. If your general permit rule conditions require testing, such testing must be completed within the time frame specified in the rule.

If you have any additional questions, please contact Dickson Dibble at 850/921-9586.

Sincerely,



Sandra F. Veazey, Chief  
Bureau of Air Monitoring  
and Mobile Sources

SFV/pg

cc: Mr. Christopher Bradley, Southwest District

RECEIVED  
NOV 17 2007

**CONCRETE BATCHING PLANT  
AIR GENERAL PERMIT REGISTRATION FORM**

**Part II. Notification to Permitting Office**

(Detach and submit to appropriate permitting office; keep copy onsite)

**Instructions:** To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050, F.A.C. (\$100 as of the effective date of this form)

**1010504-001**

**Registration Type**

Check one:

**INITIAL REGISTRATION** - Notification of intent to:

- Construct and operate a proposed new facility.
- Operate an existing facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit).

**RE-REGISTRATION** (for facilities currently using an air general permit) - Notification of intent to:

- Continue operating the facility after expiration of the current term of air general permit use.
- Continue operating the facility after a change of ownership.
- Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C., or any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.

**Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only**

If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or operator upon the effective date of this air general permit. In such case, check the first box, and indicate the operation permits being surrendered. If no air operation permits are held by the facility, check the second box.

- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s): \_\_\_\_\_
- No air operation permits currently exist for this facility.

**General Facility Information**

Facility Owner/Company Name (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)

Oldcastle Coastal, Inc.

Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)

**FORMER PART OF:**

Odessa Block Plant, FACILITY ID: 1010326

Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: 12019 State Road 54

City: Odessa

County: Pasco

Zip Code: 33556

Facility Start-Up Date (Estimated start-up date of proposed new facility.) (N/A for existing facility)

N/A

**Owner/Authorized Representative**

**Name and Position Title** (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: Billy Paul Braswell, Vice President of Operations

**Owner/Authorized Representative Mailing Address**

Organization/Firm: Oldcastle Coastal, Inc.

Street Address: 9009 Corporate Lake Drive, Suite 165

City: Tampa

County: Hillsborough

Zip Code: 33634

**Owner/Authorized Representative Telephone Numbers**

Telephone: (813) 367-9780

Fax: (813) 367-9787

Cell phone (optional):

**Facility Contact (If different from Owner/Authorized Representative)**

**Name and Position Title** (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: Phil Novomestky - Operations Foreman

**Facility Contact Mailing Address**

Organization/Firm: Oldcastle Coastal, Inc.

Street Address: 12019 State Road 54

City: Odessa

County: Pasco

Zip Code: 33556

**Facility Contact Telephone Numbers**

Telephone: (813) 920-9722

Fax: (813) 920-6639

Cell phone (optional):

**Owner/Authorized Representative Statement**

This statement must be signed and dated by the person named above as owner or authorized representative

*I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.*

*I will promptly notify the Department of any changes to the information contained in this registration form.*

Signature

Date

11/8/07

**Type of Facility**

Check one:

**Stationary Facility**

**Relocatable Facility**

**Type(s) of Reasonable Precautions Used to Prevent Unconfined Emissions**

Check all precautions to be used for the management of roads, parking areas, stock piles and yards:

**Pave Roads**

**Pave Parking Areas**

**Pave Yards**

**Maintain Roads/Parking/Yards**

**Use Water Application**

**Use Dust Suppressant**

**Remove Particulate Matter**

**Reduce Stock Pile Height**

**Install Wind Breaks**

Check all precautions to be used for the management of drop points to trucks:

**Spray Bar**

**Chute**

**Enclosure**

**Partial enclosure**

**Description of Reasonable Precautions**

Below, or as an attachment to this form, provide details of all types of reasonable precautions to be used to prevent unconfined emissions at the facility.

This facility is provided with an extensive stormwater/wastewater drainage system, which is designed to flush particulate matter from the paved yard and entrance drive. This keeps the paving cleaner, substantially reducing fugitive emissions. Aggregate stockpiles in the yard are stored on paved surfaces and kept watered, partly for quality control and partly to reduce potential emissions from these materials. Unused concrete which is brought back to the site is stored in a concrete-walled washout structure, which reduces the area needed to dry the material, while keeping it out of the main traffic pattern, where it would generate additional fugitive emissions.

**Description of Facility**

Below, or as an attachment to this form, provide a description of the concrete batching plant operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used.

NOTE: FACILITY ID : 1010326 was for the combined ready mix and block plants. These 2 plants are being split-up and are going to be owned by different legal entities, so this block plant should be issued a new facility ID number.

**Concrete Block Manufacturing Plant:**

- A single-compartment cement silo, a single-compartment cement bin and a cement weigh hopper/mixer machine (all served by a single Con-E-Co Model V 120-1000-15 central baghouse dust collector).

# Arlington Environmental Services, Inc.

## VISIBLE EMISSION TEST

Method Used (Circle One) Method 9 203A 203B Report 1740-U

Company Name Rinker Materials  
 Facility Name (FID) Odessa Block 1010320  
 Street Address 17025 SR 54  
 City Odessa State FL Zip \_\_\_\_\_

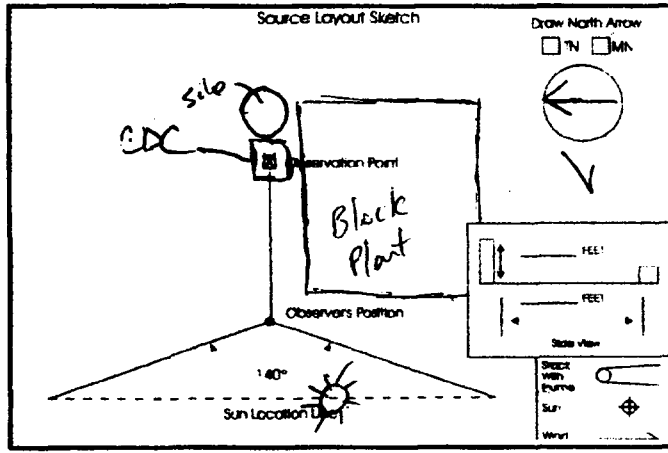
Process unload cement tanker unit # EL-0510 Operating Mode psi/g  
 Control Equipment central dust collector Operating Mode auto

Describe Emission Point vent on CDC  
 Ht of Emis. Point ~25' Ht Ref to Observer ~20'  
 Distance to Emis. Pt. ~70' Direction to Emis. Pt (Degrees) 090°

Vertical Angle to Obs. Pt. 19° Direction to Obs. Pt. (Degrees) -  
 Distance and Direction to Obs. Pt from Emission Pt -

Describe Emissions dust  
 Emission Color gray Water Droplet Plume Attached None

Describe Plume Background sky  
 Background Color blue Sky Conditions broken  
 Wind Speed ~3-10mph Wind Direction NE  
 Ambient Temp. 85° Wet Bulb Temp. - % RH -



Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Declination \_\_\_\_\_

Comments 25.93 tons of cement offloaded @ appx. 260 tph

Observation Date	Start Time	Stop Time							
6/27/07	2:25 PM	2:55 PM							
Min/Sec	0	15	30	45	Min/Sec	0	15	30	45
1	0	0	0	0	31				
2	0	0	0	0	32				
3	0	0	0	0	33				
4	0	0	0	0	34				
5	0	0	0	0	35				
6	0	0	0	0	36				
7	0	0	0	0	37				
8	5	5	0	0	38				
9	0	0	0	5	39				
10	0	0	0	0	40				
11	0	0	0	0	41				
12	0	0	0	0	42				
13	0	0	0	0	43				
14	0	0	0	0	44				
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22	0	0	0	0	52				
23	0	0	0	0	53				
24	0	0	0	0	54				
25	0	0	0	0	55				
26	0	0	0	0	56				
27	0	0	0	0	57				
28	0	0	0	0	58				
29	0	0	0	0	59				
30	0	0	0	0	60				

Average Opacity for Highest Period 19% Number of Readings Above 0 % were 0  
 Range of opacity Readings Min 0% Max 5% Number of Readings Above - % were -

Observers Name (Print) Ryan Peterson  
 Observers Signature Ryan Peterson Date 6/27/07  
 Organization Arlington Environmental Services, Inc.  
 Certified By ETA Date 5/07

# VISIBLE EMISSIONS EVALUATOR

This is to certify that

*Ryan Peterson*

met the specifications of Federal Reference Method 9 and qualified as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, North Carolina. This certificate is valid for six months from date of issue.

352349

Certificate Number

Jacksonville, Florida

Location

May 30, 2007

Date of Issue

Thomas Hore

President

Michael W. Sunford

Director of Training



APAC, Inc. • 900 Ashwood Parkway • Suite 700 • Atlanta, Georgia 30338-4780 • (770) 392-5300 • Fax (770) 392-5418

November 9, 2007

Florida Department of Environmental Protection  
Receipts  
P.O. Box 3070  
Tallahassee, FL 32315-3070

RECEIVED  
NOV 15 2007  
Bureau of Air Monitoring  
& Mobile Sources

Re: Air Permit Transfers

The enclosed check is for application for Air General Permit transfer for the facilities listed below:

Odessa Block Plant  
South Fort Myers Block Plant  
Bradenton Block Plant  
Bonita Springs Block Plant

1010326  
07100151  
0710064  
0710024

1010504-001  
0710200-001  
0810220-001  
0710261-001

Please note these facilities were formally permitted with combined ready mix and block plants. These plants are being split up and are going to be owned by different legal entities, so these block plants should be issued a new facility ID number.

Thank you in advance for your assistance.

Sincerely,

Chris Willis  
EHS Manager  
APAC, Inc.

FLORIDA DEPARTMENT OF  
2007 NOV 14 PM 4:11  
REVENUE  
ACCOUNTING



**Owner/Authorized Representative**

<p><b>Name and Position Title</b> (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)                  Print Name and Title: Billy Paul Braswell, Vice President of Operations</p>		
<p><b>Owner/Authorized Representative Mailing Address</b>                  Organization/Firm: Oldcastle Coastal, Inc.                  Street Address: 9009 Corporate Lake Drive, Suite 165                  City: Tampa County: Hillsborough Zip Code: 33634</p>		
<p><b>Owner/Authorized Representative Telephone Numbers</b>                  Telephone: (813) 367-9780 Fax: (813) 367-9787                  Cell phone (optional):</p>		

**Facility Contact (If different from Owner/Authorized Representative)**

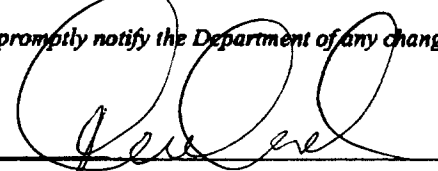
<p><b>Name and Position Title</b> (Plant manager or person to be contacted regarding day-to-day operations at the facility.)                  Print Name and Title: Phil Novomesky - Operations Foreman</p>		
<p><b>Facility Contact Mailing Address</b>                  Organization/Firm: Oldcastle Coastal, Inc.                  Street Address: 12019 State Road 54                  City: Odessa County: Pasco Zip Code: 33556</p>		
<p><b>Facility Contact Telephone Numbers</b>                  Telephone: (813) 920-9722 Fax: (813) 920-6639                  Cell phone (optional):</p>		

**Owner/Authorized Representative Statement**

This statement must be signed and dated by the person named above as owner or authorized representative

*I, the undersigned, am the owner or authorized representative of the owner or operator of the facility addressed in this Air General Permit Registration Form. I hereby certify, based on information and belief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate and complete. Further, I agree to operate and maintain the facility described in this registration form so as to comply with all applicable standards for control of air pollutant emissions found in the statutes of the State of Florida and rules of the Department of Environmental Protection and revisions thereof.*

*I will promptly notify the Department of any changes to the information contained in this registration form.*

  
 \_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

11/8/07

**CONCRETE BATCHING PLANT  
AIR GENERAL PERMIT REGISTRATION FORM**

Bureau of Air, Noise & Mobile Sources  
MULTIPLYING

RECEIVED  
NOV 28 2007

**Part II. Notification to Permitting Office**

(Detach and submit to appropriate permitting office; keep copy onsite)

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Check one:

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- Continue operating the facility after a change of ownership.
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- All existing air operation permits for this facility are hereby surrendered upon the effective date of this air general permit; specifically permit number(s):  
\_\_\_\_\_
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**General Facility Information**

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Oldcastle Coastal, Inc.

**Site Name** (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)

Odessa Block Plant, FACILITY ID: 1010326

**Facility Location** (Provide the physical location of the facility, not necessarily the mailing address.)

Street Address: 12019 State Road 54

City: Odessa

County: Pasco

Zip Code: 33556

**Facility Start-Up Date** (Estimated start-up date of proposed new facility.)(N/A for existing facility)

N/A

**Owner/Authorized Representative**

**Name and Position Title** (Person who, by signing this form below, certifies that the facility is eligible to use this air general permit.)

Print Name and Title: Billy Paul Braswell, Vice President of Operations

**Owner/Authorized Representative Mailing Address**

Organization/Firm: Oldcastle Coastal, Inc.

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Cell phone (optional):

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**Name and Position Title** (Plant manager or person to be contacted regarding day-to-day operations at the facility.)

Print Name and Title: Phil Novomesky - Operations Foreman

**Facility Contact Mailing Address**

Organization/Firm: Oldcastle Coastal, Inc.

Street Address: 12019 State Road 54

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County: Pasco

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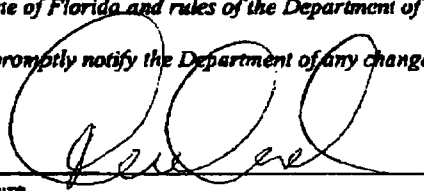
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*I will promptly notify the Department of any changes to the information contained in this registration form.*

Signature



Date

11/8/07

**Type of Facility**

Check one:

**Stationary Facility**                       **Relocatable Facility**

**Type(s) of Reasonable Precautions Used to Prevent Unconfined Emissions**

Check all precautions to be used for the management of roads, parking areas, stock piles and yards:

<input checked="" type="checkbox"/> <b>Pave Roads</b>	<input checked="" type="checkbox"/> <b>Pave Parking Areas</b>	<input checked="" type="checkbox"/> <b>Pave Yards</b>
<input checked="" type="checkbox"/> <b>Maintain Roads/Parking/Yards</b>	<input checked="" type="checkbox"/> <b>Use Water Application</b>	<input type="checkbox"/> <b>Use Dust Suppressant</b>
<input type="checkbox"/> <b>Remove Particulate Matter</b>	<input type="checkbox"/> <b>Reduce Stock Pile Height</b>	<input type="checkbox"/> <b>Install Wind Breaks</b>

Check all precautions to be used for the management of drop points to trucks:

<input type="checkbox"/> <b>Spray Bar</b>	<input type="checkbox"/> <b>Chute</b>	<input type="checkbox"/> <b>Enclosure</b>
	<input checked="" type="checkbox"/> <b>Partial enclosure</b>	

**Description of Reasonable Precautions**

Below, or as an attachment to this form, provide details of all types of reasonable precautions to be used to prevent unconfined emissions at the facility.

This facility is provided with an extensive stormwater/wastewater drainage system, which is designed to flush particulate matter from the paved yard and entrance drive. This keeps the paving cleaner, substantially reducing fugitive emissions. Aggregate stockpiles in the yard are stored on paved surfaces and kept watered, partly for quality control and partly to reduce potential emissions from these materials. Unused concrete which is brought back to the site is stored in a concrete-walled washout structure, which reduces the area needed to dry the material, while keeping it out of the main traffic pattern, where it would generate additional fugitive emissions.

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NOTE: FACILITY ID : 1010326 was for the combined ready mix and block plants. These 2 plants are being split-up and are going to be owned by different legal entities, so this block plant should be issued a new facility ID number.

**Concrete Block Manufacturing Plant:**

- A single-compartment cement silo, a single-compartment cement bin and a cement weigh hopper/mixer machine (all served by a single Con-E-Co Model V 120-1000-15 central baghouse dust collector).

# Arlington Environmental Services, Inc.

## VISIBLE EMISSION TEST

Method Used (Circle One) Method 9 203A 203B Report 1740-U

Company Name Rinker Materials  
 Facility Name (FID) Odessa Block 1010320  
 Street Address 17025 SR 54  
 City Odessa State FL Zip \_\_\_\_\_

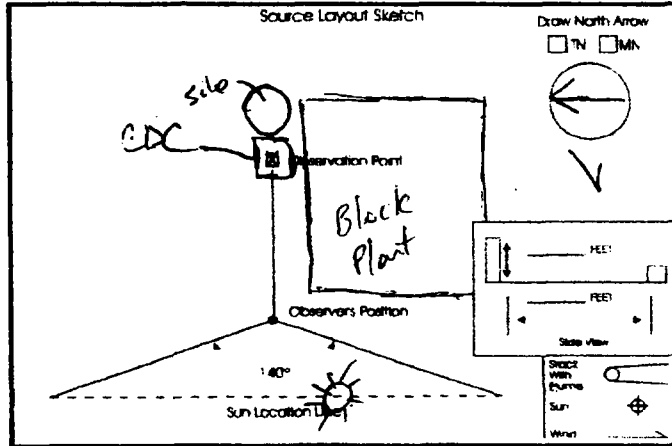
Process unload cement tanker EU-0510 psi/g unit # \_\_\_\_\_ Operating Mode \_\_\_\_\_  
 Control Equipment central dust collector Operating Mode auto

Describe Emission Point vent on CDC  
 Ht of Emis. Point ~25' Ht Rel to Observer ~20'  
 Distance to Emis. Pt. ~70' Direction to Emis. Pt (Degrees) 090°

Vertical Angle to Obs. Pt. 19° Direction to Obs. Pt. (Degrees) —  
 Distance and Direction to Obs. Pt from Emission Pt —

Describe Emissions dust  
 Emission Color gray Water Droplet Plume Attached \_\_\_\_\_ Detached \_\_\_\_\_ None \_\_\_\_\_

Describe Plume Background sky  
 Background Color blue Sky Conditions broken  
 Wind Speed ~3-10mph Wind Direction NE  
 Ambient Temp. 85° Wet Bulb Temp. — % RH —



Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Declination \_\_\_\_\_

Comments 25.93 tons of cement offloaded @ appx. 260 tph

Min/Sec	Observation Date <u>6/27/07</u>				Start Time <u>2:25pm</u>				Stop Time <u>2:55pm</u>			
	0	15	30	45	0	15	30	45				
1	0	0	0	0	31							
2	0	0	0	0	32							
3	0	0	0	0	33							
4	0	0	0	0	34							
5	0	0	0	0	35							
6	0	0	0	0	36							
7	0	0	0	0	37							
8	5	5	0	0	38							
9	0	0	0	5	39							
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27	0	0	0	0	57							
28	0	0	0	0	58							
29	0	0	0	0	59							
30	0	0	0	0	60							

Average Opacity for Highest Period 19% Number of Readings Above 0 % were 0  
 Range of opacity Readings Min 0% Max 5% Number of Readings Above \_\_\_\_\_ % were \_\_\_\_\_  
 Observers Name (Print) Ryan Peterson  
 Observers Signature Ryan Peterson Date 6/27/07  
 Organization Arlington Environmental Services, Inc.  
 Certified By ETA Date 5/07

# VISIBLE EMISSIONS EVALUATOR

This is to certify that

*Ryan Peterson*

met the specifications of Federal Reference Method 9 and qualified as a visible emissions evaluator. Maximum deviation on white and black smoke did not exceed 7.5% opacity and no single error exceeding 15% opacity was incurred during the certification test conducted by Eastern Technical Associates of Raleigh, North Carolina. This certificate is valid for six months from date of issue.

352349

Certificate Number

Jacksonville, Florida

Location

May 30, 2007

Date of Issue

Thomas Hore

President

Michael W. Lunsford

Director of Training


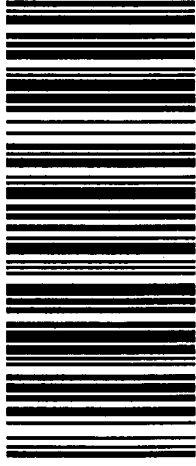
**UPS CampusShip: View/Print Label**

- 1. Print the label(s):** Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the dotted line.** Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.
- 3. GETTING YOUR SHIPMENT TO UPS**  
**Customers without a Daily Pickup**
  - o Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages.
  - o Hand the package to any UPS driver in your area.
  - o Take your package to any location of The UPS Store®, UPS Drop Box, UPS Customer Center, UPS Alliances (Office Depot® or Staples®) or Authorized Shipping Outlet near you. Items sent via UPS Return Services<sup>SM</sup> (including via Ground) are accepted at Drop Boxes.
  - o To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

**Customers with a Daily Pickup**

- o Your driver will pickup your shipment(s) as usual.

FOLD HERE

<p style="text-align: right;">LTR 1 OF 1</p> <p>CHRIS WILLIS 770-392-5300 5405 APAC, INC. 900 ASHWOOD PARKWAY ATLANTA GA 30338</p> <p><b>SHIP TO:</b> DICK DIBBLE 850-921-9586 FLORIDA DEP DIV. OF AIR RESOURCE MANAGEMENT 2600 BLAIR STONE RD MS 5510 <b>TALLAHASSEE FL 32399-6542</b></p>	<p><b>FL 323 0-01</b></p> 	<p><b>UPS NEXT DAY AIR</b></p> <p><b>1</b></p> <p>TRACKING #: 1Z 326 284 01 9754 3560</p> 	<p style="text-align: right;">BILLING: P/P</p> <p style="text-align: right;">Reference # 1: 0120 Reference # 2: business</p> <p style="text-align: right;">FLORIDA DEP 2600 BLAIRSTONE RD STOP 5510 TALLAHASSEE FL 32399-6542</p> <p style="text-align: right;">P: <b>BROWN</b> S: <b>OUT</b> I: <input type="text"/></p> <p style="text-align: right;"><b>BLAR-1076</b> <input type="text"/></p> <p style="text-align: right;">1Z326284019754 3560 1090</p> <p style="font-size: small; text-align: right;">FERRIS F1TAL13 HW 2R 06:56:01 2007 TB 3230 HIP 6.2.1 INT4420</p>
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**Florida Department of Environmental Protection  
Cash Receiving Application (CRA)  
Cashlisting by Deposit #: 281284 thru 281284  
Printed: 11/15/2007 4:32:30 PM - Page 10**

*✓ = ARMS  
X = EXCEL*

Cashlisting: **65123** Cashlist Area: **3755**  
Deposit No: **281284** Date Deposited: **11/15/2007**

Description: **DIV OF AIR RESOURCES MGMT.**  
Contact: **PATTY ADAMS**

Object	Transmittal	Dep.DDN	Receipt Number	Pre-Numbered Receipt	Name	Check Number	Payment Amount	Reference Account	Payment Number	Remittance Number	Fund
002272	45648		606353		APAC INC	1000003476	\$100.00	1010326 ✓ #1010504	847840	755057	PFTF - REMOVED BLOCK PLANT
	45648		606353		APAC INC	1000003476	\$100.00	0710015 ✓ #0710260	847841	755057	PFTF - REMOVED BLOCK PLANT
	45648		606354		APAC INC	1000003425	\$100.00	0330266	847862	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0030043	847861	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0050037	847860	755058	PFTF
	45648		606353		APAC INC	1000003476	\$100.00	0810064 ✓ #0810220	847842	755057	PFTF - REMOVED BLOCK PLANT
	45648		606353		APAC INC	1000003476	\$100.00	0710024 ✓ #0710261	847843	755057	PFTF - REMOVED BLOCK PLANT
	45648		606354		APAC INC	1000003425	\$100.00	0810064	847844	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	1010077	847845	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	1030139	847846	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	1010326	847847	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0450009	847848	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	1310010	847849	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0710024	847850	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0150086	847851	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0710015	847852	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0710229	847853	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0710096	847854	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0210047	847855	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0210032	847856	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	0910075	847857	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	7770043	847858	755058	PFTF
	45648		606354		APAC INC	1000003425	\$100.00	1136024	847859	755058	PFTF
<b>Object Code 002272 Subtotal:</b>							<b>\$2,300.00</b>				
002273	45641	478062 ✓	606283		HAO HAO INTERNATIONAL INC	2114	\$75.00	009015 ✓	848030	754987	APCTF

