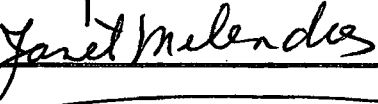
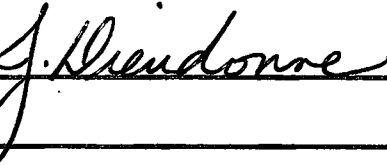
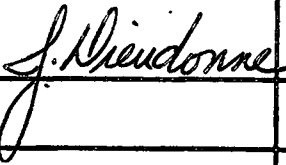
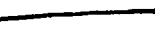


DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT (9-1 ALTERNATE SCHEDULE)
NON-PAY WEEK

DAY: FRIDAY
DATE: December 14, 2001

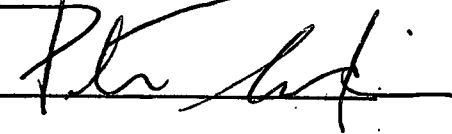
SECTION: ASBESTOS CONTROL PROGRAM
DIST. #: 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00AM-5:00P.M.							
Karyn Brun	7:55		2:00	2:30	4:30		8 hrs ML
Janet Melendres	7:40		1	1:30	4:30		8 hrs ML
Virginia Cheng							5L
9:00AM-5:30P.M.							
Lisa Reyna							A/L
8:30AM-5:30P.M.							
Josianne Dieudonne	8:25		1:10	2:10	4:30		1 hr A/L
9:00AM-6:00P.M.							
Ngozi Abanobi							AL

Supervisor's initial required for other than scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor 



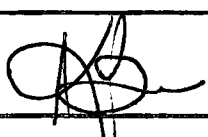
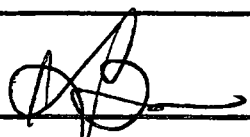
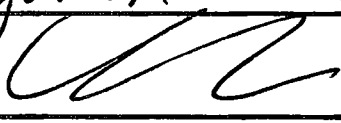
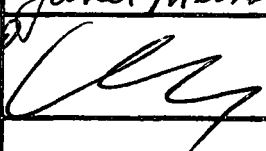
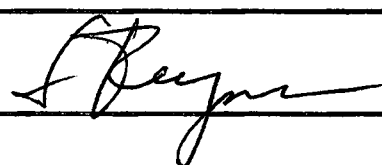
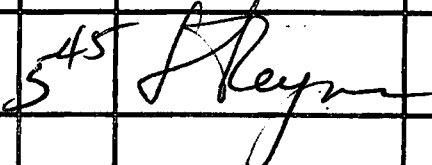
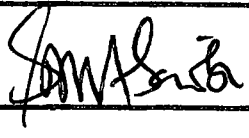
DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT (9-1 ALTERNATE SCHEDULE)

NON-PAY WEEK

DAY: THURSDAY
DATE: December 13, 2001

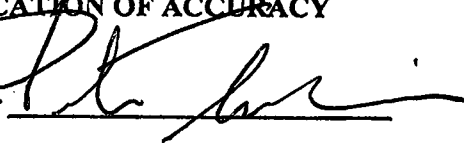
SECTION: ASBESTOS CONTROL PROGRAM
DIST. #: 5000

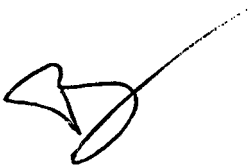
The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00AM-5:00P.M.							
Karyn Brun	8 ⁰⁰		1	2	5 ⁰⁰		
Janet Melendres	7 ⁴⁰	Janet Melendres	1	2	8 ⁰⁰	Janet Melendres	Plus 3 hrs O.T.
Virginia Cheng	8 ⁰⁰		1	2	3 ⁰⁰		Worked 6 hrs. in AM
9:00AM-5:30P.M.							
Lisa Reyna	9 ⁰⁵				5 ⁴⁵		
8:30AM-5:30P.M.							
Josianne Dieudonne	8:25	J. Dieudonne	1	2	5:30	J. Dieudonne	
9:00AM.-6:00P.M.							
Ngozi Abanobi	9 ⁰⁵	Ngozi Asanghi	12 ³⁰	1 ³⁰	6 ⁰⁰		

Supervisor's initial required for other than scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor 



DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT (9-1 ALTERNATE SCHEDULE)

NON-PAY WEEK

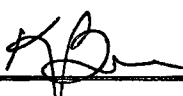
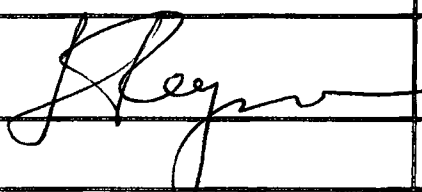
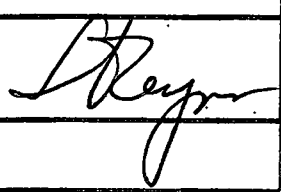
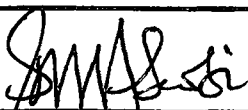
DAY: WEDNESDAY

SECTION: ASBESTOS CONTROL PROGRAM

DATE: December 12, 2001

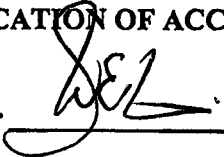
DIST. #: 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00AM-5:00P.M.							
Karyn Brun	7:40		12:00	1	4:00		1 hr AL
Janet Melendres	7:45	Janet Melendres	1	2	8:00	Janet Melendres	3 1/2 hrs O.T.
Virginia Cheng	8:05		1	2	5:20		Red
9:00AM-5:30P.M.							
Lisa Reyna	9:00		12:00	2:20	5:30		
8:30AM-5:30P.M.							
Josianne Dieudonne	8:10	J. Dieudonne	12:00	1:00	5:30	J. Dieudonne	
9:00AM-6:00P.M.							
Ngozi Abanobi	9:05	Ngozi Asasi	12:30	1:30	6:00		

Supervisor's initial required for other than scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor 

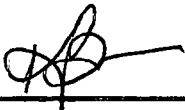
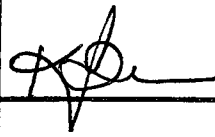
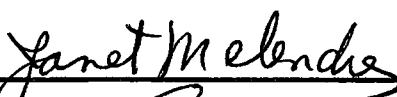
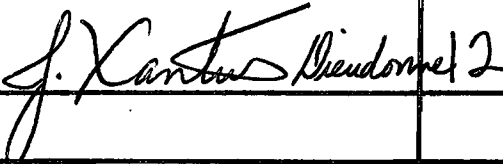
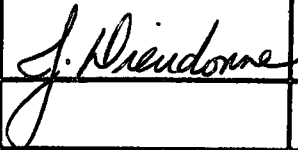
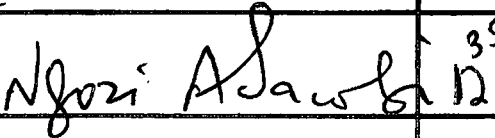
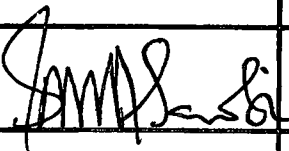


DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT (9-1 ALTERNATE SCHEDULE)
NON-PAY WEEK

DAY: TUESDAY
DATE: December 11, 2001

SECTION: ASBESTOS CONTROL PROGRAM
DIST. #: 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00AM-5:00P.M.							
Karyn Brun	7 ⁵³		1	2	5 ⁰⁰		
Janet Melendres	7 ⁴⁰		1	2	5 ⁰⁰		
Virginia Cheng	8 ⁰⁰		1	2	5 ⁰⁰		
9:00AM-5:30P.M.							
Lisa Reyna							DAY OFF
8:30AM-5:30P.M.							
Josianne Dieudonne	8:20		2	1	5:30		
9:00AM-6:00P.M.							
Ngozi Abanobi	9 ⁰⁵		12 ³⁵	1 ³⁵	6 ⁰⁰		

Supervisor's initial required for other than scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor 



DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT (9-1 ALTERNATE SCHEDULE)

NON-PAY WEEK

DAY: MONDAY

SECTION: ASBESTOS CONTROL PROGRAM

DATE: December 10, 2001

DIST. #: 5000

The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

NAME	ARR.	SIGNATURE	LUNCH		DEP.	SIGNATURE	REMARKS
FULL TIME			OUT	IN			
8:00AM-5:00P.M.							
Karyn Brun	7 ³⁵	<i>KB</i>	1	2	4 ⁰⁰	<i>KB</i>	1 hr AL
Janet Melendres	7 ⁴⁵	<i>Janet Melendres</i>	1	2	5 ⁰⁰	<i>Janet Melendres</i>	
Virginia Cheng	8 ¹⁰	<i>VC</i>	1	2	5 ⁰⁰	<i>VC</i>	
9:00AM-5:30P.M.							
Lisa Reyna	9 ¹⁵	<i>L Reyna</i>	1 ³⁰	3 ⁰⁰	6 ⁰⁰	<i>L Reyna</i>	20 min later 1/2 hr CH 1 1/2 hr.
8:30AM-5:30P.M.							
Josianne Dieudonne	8:10	<i>J. Dieudonne</i>	12	1	5:30	<i>J. Dieudonne</i>	
9:00AM-6:00P.M.							
Ngozi Abanobi	9 ⁰⁵	<i>Ngozi Abanobi</i>	12 ³⁵	1 ³⁵	6 ⁰⁰	<i>Ngozi Abanobi</i>	

Supervisor's initial required for other than scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor *[Signature]*

GA