

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

DAY FRIDAY SECTION ASBESTOS AND LEAD CONTROL PROGRAM
DATE April 13, 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-4:30PM							
KARYN BRUN	7:45	<i>KB</i>	1	1:30	4:00	<i>KB</i>	7 1/2 hrs
JANET MELENDRES	7:35	<i>Janet Melendres</i>	1	1:30	4:00	<i>Janet Melendres</i>	7 1/2 hrs
VIRGINIA CHENG							
8:30AM-5:30PM							
LISA REYNA	8:35	<i>L. Reyna</i>	1:35	2:35	6:00	<i>L. Reyna</i>	8 1/4 hrs
8:30AM-5:00PM							
NGOZI ABANOBI	8:30	<i>Ngzi Abanobi</i>	Day Off				DAY OFF
JOSIANNE DIEUDONNE	8:10	<i>J. Dieudonne</i>	12	1	5:00	<i>J. Dieudonne</i>	

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

CERTIFICATION OF ACCURACY

Supervisor *[Signature]*

I spoke to Karyn.
She said she made a
mistake. I will confirm with
Peter also.
R. Radin
4/16/01

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

PAY WEEK

DAY THURSDAY SECTION ASBESTOS AND LEAD CONTROL PROGRAM
DATE April 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-4:30PM							
KARYN BRUN	7 ⁴⁵	<i>[Signature]</i>	12	1	4 ³⁰	<i>[Signature]</i>	
JANET MELENDRES	7 ³⁰	<i>Janet Melendres</i>	1	2	4 ³⁰	<i>Janet Melendres</i>	
VIRGINIA CHENG							<i>AL</i>
8:30AM-5:30PM							
LISA REYNA	8 ⁰⁰	<i>L Reyna</i>	12 ⁰⁰	1 ⁰⁰	5 ³⁰	<i>L Reyna</i>	
8:30AM-5:00PM							
NGOZI ABANOBI	8 ⁴⁵	<i>Ngozi Abanobi</i>	1 ⁵⁰	2 ⁰⁰	5 ¹⁵	<i>[Signature]</i>	<i>7:15 HRS per</i>
JOSIANNE DIEUDONNE	8:10	<i>J. Dieudonne</i>	12	1	5:00	<i>J. Dieudonne</i>	

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

CERTIFICATION OF ACCURACY

Supervisor *[Signature]*

[Handwritten mark]



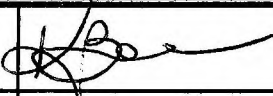
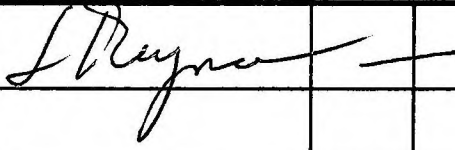
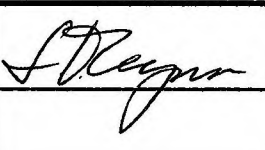
DEPARTMENT OF ENVIRONMENTAL PROTECTION
TECHNICAL REVIEW UNIT (9-1 ALTERNATE SCHEDULE)

PAY WEEK

DAY WEDNESDAY
DATE April 11, 2001

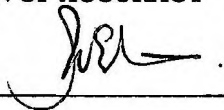
SECTION ASBESTOS AND LEAD CONTROL PROGRAM
DIST. # 5000

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-4:30PM							
KARYN BRUN	7 ³⁰		1 ⁴⁵	2 ⁴⁵	4 ³⁰		
JANET MELENDERS	7 ⁵⁰		1	2	4 ³⁰		
VIRGINIA CHENG							AC
8:30AM-5:30PM							
LISA REYNA	8 ³⁰				4 ³⁰		(1 Hr) S/BSY
8:30AM-5:00PM							
NGOZI ABANOBI							AC
JOSIANNE DIEUDONNE							DAY OFF

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

CERTIFICATION OF ACCURACY

Supervisor 

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

PAY WEEK

DAY TUESDAY SECTION ASBESTOS AND LEAD CONTROL PROGRAM
DATE April 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-4:30PM							
KARYN BRUN	740	<i>K Brun</i>	12 ⁰⁰	1	4 ³⁰	<i>K Brun</i>	
JANET MELENDRES	10 ³⁰	<i>Janet Melendres</i>	1	2	4 ³⁰	<i>Janet Melendres</i>	Will be 1/2 C.T. Entire.
VIRGINIA CHENG							DAY OFF
8:30AM-5:30PM							
LISA REYNA	8 ³⁵	<i>L Reyna</i>	1 ⁵⁰	2 ⁴⁰	5 ⁴⁵	<i>L Reyna</i>	S/BY
8:30AM-5:00PM							
NGOZI ABANOBI	8 ³⁵	<i>Ngozi Asenla</i>	12 ⁰⁰	1 ⁰⁰	1 ⁵⁰	<i>Ngozi Asenla</i>	change HRS to A/L
JOSIANNE DIEUDONNE	8:20	<i>J. Dieudonne</i>	12	1	5:00	<i>J. Dieudonne</i>	

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

CERTIFICATION OF ACCURACY

Supervisor *[Signature]*

[Signature]

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

PAY WEEK

DAY MONDAY
DATE April 9, 2001

SECTION ASBESTOS AND LEAD 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-4:30PM							
KARYN BRUN							DAY OFF
JANET MELENDRES							DAY OFF
VIRGINIA CHENG	<u> </u>						<u>AL</u>
8:30AM-5:30PM							
LISA REYNA	<u>8⁴⁵</u>	<u>L Reyna</u>	<u>1³⁰</u>	<u>2²⁵</u>	<u>5⁵⁰</u>	<u>L Reyna</u>	<u>SHRS 5/24</u> <u>jm</u>
8:30AM-5:00PM							
NGOZI ABANOBI	<u>8³⁵</u>	<u>Ngazi Abanobi</u>	<u>1⁰⁰</u>	<u>2⁰⁰</u>	<u>5⁰⁰</u>	<u>Ngazi Abanobi</u>	
JOSIANNE DIEUDONNE	<u> </u>						<u>A/L</u>

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

CERTIFICATION OF ACCURACY
Supervisor 

