

DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENFORCEMENT COMPLIANCE
TRAINING & CERTIFICATION UNIT

DAY Friday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 31, 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.

REGULAR & 4-1 TIME SHEET

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
FULL TIME			out	in			
8:00-4:00							
CASTER, PATRICIA	8:00	P. Caster	12-1	1:40	P. Caster		
8:30-4:30							
MEJIA, HADEE	8:30	Hmejia	1-2	4:30	Hmejia		
9:00-5:00							
BRUTON, RHONDA	10	R. Bruton	1	2:5	R. Bruton		
TYRA, SANDERS							
WYATT, LISETTE							
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							A/L
8:00-5:00							

Supervisor's initials
Required for other than
Scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor: R. Rao


DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENFORCEMENT COMPLIANCE
TRAINING & CERTIFICATION UNIT

DAY Thursday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 30, 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.

REGULAR & 4-1 TIME SHEET

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
FULL TIME			out	in			
8:00-4:00							
CASTER, PATRICIA		<i>P. Caster</i>	12-12:30	4:00		<i>P. Caster</i>	
8:30-4:30							
MEJIA, HADEE	8:30	<i>Hmejia</i>	1-2	4:30		<i>Hmejia</i>	
9:00-5:00							
BRUTON, RHONDA	11	<i>R. Bruton</i>			5	<i>R. Bruton</i>	
TYRA, SANDERS						<i>Vacation</i>	<i>AK</i>
WYATT, LISETTE						<i>Vacation</i>	<i>CT</i>
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							<i>AK</i>
8:00-5:00							

Supervisor's initials
Required, for, other than
Scheduled work hours.

CERTIFICATION OF ACCURACY

[Signature]
Supervisor: _____

[Signature]

DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENFORCEMENT COMPLIANCE
TRAINING & CERTIFICATION UNIT

DAY Wednesday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 29, 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.

REGULAR & 4-1 TIME SHEET

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
FULL TIME			out	in			
8:00-4:00							
CASTER, PATRICIA	8:15	P. Caster	12	12:30	7:30	P. Caster	1 1/2 hrs. 1st 2 hrs. 9th row
8:30-4:30							
MEJIA, HADEE	8:30	Hmejia	1	2	7:00	Hmejia	2 1/2 hrs. 9th row
9:00-5:00							
BRUTON, RHONDA							Doctors' appointment.
TYRA, SANDERS						Vacation	AL
WYATT, LISETTE						Vacation	
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							AL
8:00-5:00							

Supervisor's initials
Required, for, other than
Scheduled work hours.

CERTIFICATION OF ACCURACY

Supervisor: [Signature]

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DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENFORCEMENT COMPLIANCE
TRAINING & CERTIFICATION UNIT

DAY TUESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 28, 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.

REGULAR & 4-1 TIME SHEET

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
FULL TIME			out	in			
8:00-4:00							
CASTER, PATRICIA	8:15	P. Caster	12-	12:30	4:00	P. Caster	worked 7 hrs.
8:30-4:30							Deer
MEJIA, HADEE	8:30	Hadee Mejia	1-2		4:30	Hadee Mejia	
9:00-5:00							
BRUTON, RHONDA	11	R. Bruton	1	2	5	R. Bruton	
TYRA, SANDERS							AL
WYATT, LISETTE						Vacation leave	
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							A/L
8:00-5:00							

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

CERTIFICATION OF ACCURACY


Supervisor: _____

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DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENFORCEMENT COMPLIANCE
TRAINING & CERTIFICATION UNIT

DAY MONDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 27, 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.

REGULAR & 4-1 TIME SHEET

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
FULL TIME			out	in			
8:00-4:00							
CASTER, PATRICIA	8-	P. Caster	12-1	400	P. Caster		
8:30-4:30							
MEJIA, HADEE	8:30	Hmejia	1-2	4:30	Hmejia		
9:00-5:00							
BRUTON, RHONDA							called in sick
TYRA, SANDERS							AL
WYATT, LISETTE						Vacation	
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							off
8:00-5:00	DAY OFF						

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

CERTIFICATION OF ACCURACY

Supervisor: [Signature]

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