

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

DAY Friday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 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.

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	4:00		P. Caster	
8:30-4:30							
MEJIA, HADEE	8:30	H. Mejia			1:30	H. Mejia	2 hrs C.T.
9:00-5:00							
BRUTON, RHONDA	12	R. Bruton			5	R. Bruton	
TYRA, SANDERS	9:00	T. Sanders	1:00	2:00	5:00	T. Sanders	
WYATT, LISETTE	9:30	L. Wyatt			2:30	L. Wyatt	2 1/2 C.T. ER
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY	8-	H. Garrison	2	6-		H. Garrison	
8:00-5:00							

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

CERTIFICATION OF ACCURACY

Supervisor: [Signature]
[Signature]

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

DAY Thursday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug 9, 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	4:00	P. Caster		
8:30-4:30							
MEJIA, HADEE	8:30	H. Mejia	1-2	4:30	H. Mejia		
9:00-5:00							
BRUTON, RHONDA	9:30	R. Bruton	1	2	5	R. Bruton	
TYRA, SANDERS	9:00	T. Sanders	2:00	3:00	5:00	T. Sanders	
WYATT, LISETTE	9:00	L. Wyatt	1:30	1:30	5:00	L. Wyatt	ER
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							Safety 3 Health
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 Wednesday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 8, 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	1-7:30		P. Caster	3 1/2 hrs new
8:30-4:30							
MEJA, HADEE	8:30	Hmeja	1-2	2-4:00		Hmeja	2 1/2 hrs out new
9:00-5:00							
BRUTON, RHONDA	10	R. Bruton	1	1:30	5	R. Bruton	
TYRA, SANDERS	9:00	T. Sanders	1:30	2:30	5:00	T. Sanders	
WYATT, LISETTE	9:00	L. Wyatt	1:30	2:30	5:00	L. Wyatt	ER
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY	1:40	H. Garrison	1	2	5	H. Garrison	
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 TUESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 7, 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. Cester	12-1	4:00		P. Cester	
8:30-4:30							
MEJIA, HADEE	8:30	H. Mejia	1-2	4:30		H. Mejia	
9:00-5:00							
BRUTON, RHONDA	12:30	R. Bruton			5	R. Bruton	
TYRA, SANDERS	9:30	T. Sanders	2:00	3:00	5:00	T. Sanders	called in sick
WYATT, LISETTE							per
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY	8-1	H. Garrison	1	2	6:30	H. Garrison	Relief CHM
8:00-5:00							no o.t.

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

CERTIFICATION OF ACCURACY

Supervisor: [Signature]

T.S.

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

DAY MONDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug 6, 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							Day Off
CASTER, PATRICIA	8:30	P. Cester	12-1	1:00	4:30	P. Cester	Worked 5 hrs Late 746
8:30-4:30							
MEJIA, HADEE	8:30	Hmejia	1-2	2-4:30		Hmejia	
9:00-5:00							
BRUTON, RHONDA	9:30	R. Bruton	1:30	2:30	5	R Bruton	ETRAN
TYRA, SANDERS	9:20	T. Sanders	work	work	2:30	T. Sanders	Worked 5 hrs Day
WYATT, LISETTE	9:45	L Wyatt	12-1	1-5		R Wyatt	ER
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							
8:00-5:00							

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

CERTIFICATION OF ACCURACY

Supervisor: [Signature]