

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

DAY Friday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug 3, 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	830	P. Caster	12-1	430	P. Caster		
8:30-4:30							
MEJIA, HADEE	830	Hadee	1-2	4:30	Hadee		
9:00-5:00							
BRUTON, RHONDA							He did not call DEW
TYRA, SANDERS							MR. Sanders
WYATT, LISETTE	900	R Wyatt		200	R Wyatt		2 hr CT LAB DEW
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							called S/L
8:00-5:00							DEW

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 Thursday

SECTION: ASBESTOS & LEAD PROGRAM

DATE Aug. 2, 2001

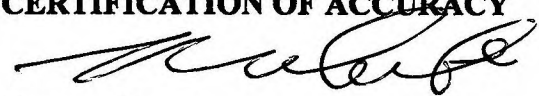
DIST. # 5000

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	H. Mejia	1-2	2:45		H. Mejia	
9:00-5:00							
BRUTON, RHONDA							Scalled in before
TYRA, SANDERS							R
WYATT, LISETTE	9:15	R. Wyatt	12:30	1:30	5:00	R. Wyatt	
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY	8-1	H. Garrison	12:00	1:26		H. Garrison	Safety & 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. 1, 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	7 ³⁰	P. Caster	3 ¹⁵	1 hr 15 min out
8:30-4:30							new
MEJIA, HADEE	8:30	H. Mejia	1-2	7:00	H. Mejia		2 hr 15 min out
9:00-5:00							new
BRUTON, RHONDA							called in sick new
TYRA, SANDERS							AK
WYATT, LISETTE	8:50	L. Wyatt	1 ⁰⁰	2 ⁰⁰	5 ⁰⁰	L. Wyatt	
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY	8-	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: [Signature]

[Signature]

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

DAY TUESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE July 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							<i>DeW</i>
CASTER, PATRICIA	8:30	<i>P. Caster</i>	12-1	4:30	<i>P. Caster</i>		<i>wiped this</i>
8:30-4:30							<i>DeW</i>
MEJIA, HADEE	8:30	<i>H. Mejia</i>	1-2	4:30	<i>H. Mejia</i>		
9:00-5:00							
BRUTON, RHONDA							<i>Called in sick DeW</i>
TYRA, SANDERS							<i>DeW</i>
WYATT, LISETTE	9:05	<i>L. Wyatt</i>	1:30	2:30	5:00	<i>L. Wyatt</i>	
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY	8:30	<i>H. Garrison</i>	1-2	6-	<i>H. Garrison</i>		<i>R. Train Delay</i>
8:00-5:00							<i>Signal Problem</i>

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

CERTIFICATION OF ACCURACY

[Signature]
Supervisor: _____

[Handwritten mark]

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

DAY MONDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE July 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	8:00	P. Caster	12-1	4:00	P. Caster		
8:30-4:30							
MEJIA, HADEE	8:30	Hmeja	1-2	4:30	Hmeja		
9:00-5:00							
BRUTON, RHONDA	12	R. Bruton	NO LUNCH	5	R. Bruton		called. will be in late PM
TYRA, SANDERS							MR
WYATT, LISETTE	9:05	Ryatt	1:00	2:00	5:00	Ryatt	Field Rep
FOSTER, ANDY							
4 - 1							
GARRISON, HEDY							
8:00-5:00	DAY OFF						

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

CERTIFICATION OF ACCURACY

Supervisor: [Signature]

By