

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

DAY FRIDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE May 18, 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>begin</i>
CASTER, PATRICIA	<i>8:00</i>	<i>P. Caster</i>	<i>—</i>	<i>11:30</i>	<i>P. Caster</i>	<i>E/L</i>	
8:30-4:30							
MEJIA, HADEE	<i>8:30</i>	<i>H. Mejia</i>	<i>1-2</i>	<i>4:30</i>	<i>H. Mejia</i>		
9:00-5:00							
BRUTON, RHONDA	<i>9:05</i>	<i>R. Bruton</i>	<i>1-2</i>	<i>5</i>	<i>R. Bruton</i>		
TYRA, SANDERS	<i>9:05</i>	<i>T. Sanders</i>	<i>1-2</i>	<i>5:00</i>	<i>T. Sanders</i>		
WYATT, LISETTE	<i>9:00</i>	<i>L. Wyatt</i>	<i>1:35</i>	<i>2:30</i>	<i>5:00</i>	<i>L. Wyatt</i>	
4 - 1							
GARRISON, HEDY	<i>7:00</i>	<i>H. Garrison</i>	<i>1-2</i>	<i>6</i>	<i>H. Garrison</i>		
8:00-6:00							

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

CERTIFICATION OF ACCURACY

Supervisor: *R. Raehn*

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

DAY THURSDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE May 17, 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	7:55	P. Caster	10-1	11:00	P. Caster		
8:30-4:30							
MEJIA, HADEE	8:30	Hadee Mejia	1-2	4:00	Hadee Mejia	1/2 hr C.T.	
9:00-5:00							
BRUTON, RHONDA	9:30	R Bruton	1	2	5	R. Bruton	
TYRA, SANDERS	9:15	T. Sanders	1-2	5:00	T. Sanders		B TRAIN 201 AD
WYATT, LISETTE	9:05	L Wyatt		1:00	1 pm	L Wyatt	3 hrs C.T.
4 - 1							
GARRISON, HEDY	7:15	H. Garrison	1	2	6-	H. Garrison	
8:00-6:00							

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 WEDNESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE May 16, 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 1/2 hrs OT new
8:30-4:30							
MEJIA, HADEE	8:30	Hadee Mejia	1-2	7:00		Hadee Mejia	2 1/2 hrs O.T. new
9:00-5:00							
BRUTON, RHONDA	9:00	R. Bruton			2	R. Bruton	TRAIN delay Dr. Appt
TYRA, SANDERS	9:00	T. Sanders	1	2	7 ⁰⁰	T. Sanders	2 hrs OT new
WYATT, LISETTE	9:00	L. Wyatt	1 ³⁰	2 ³⁰	5 ⁰⁰	L. Wyatt	
4 - 1							
GARRISON, HEDY	7:50	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: R. Radwan

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

DAY TUESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE May 15, 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	Hadee		1:30	Hadee		2 hrs S/L
9:00-5:00							
BRUTON, RHONDA							Son's sick with BB Jm. 1-half day
TYRA, SANDERS							EAR Sick
WYATT, LISETTE	9:00	R Wyatt	1:30	2:30	5:00	R Wyatt	Field Duty
4 - 1							
GARRISON, HEDY						S.H.	Dr's. appt.
8:00-6:00							

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

CERTIFICATION OF ACCURACY

Supervisor: [Signature]

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

DAY MONDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE May 14, 2001

DIST. # 5000

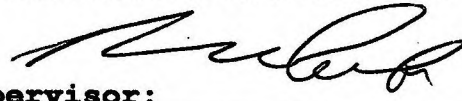
The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

REGULAR & 4-1 TIME SHEET

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
FULL TIME			out	in			
8:00-4:00							
CASTER, PATRICIA	800	P. Caster	12	1	300	P. Caster	1 hr. c/f
8:30-4:30							
MEJIA, HADEE	8:30	Hmejia	1	2	4:30	Hmejia	
9:00-5:00							
BUKUN, RHONDA	930	R. Bukun	110	210	5	R. Bukun	
TYRA, SANDERS							AL
WYATT, LISETTE	905	L Wyatt	130	230	500	L Wyatt	
4 - 1							
GARRISON, HEDY							
8:00- :00							
DAY OFF							

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

CERTIFICATION OF ACCURACY


Supervisor: _____

BY