

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

DAY FRIDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE March 23, 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							EAK
8:30-4:30							
MEJIA, HADEE	8:30	Hadjea	1-	2-	3:30	Hadjea	ohr. c.t. New
9:00-5:00							
BRUTON, RHONDA	12	R Bruton			5	R Bruton	
TYRA, SANDERS	9:00	T. Sanders	1:00	2:00	4:30	T. Sanders	New 1/2 hr. Othm L.
WYATT, LISETTE	9:00	Wyatt	1:00	2:00	5:00	Wyatt	
4 - 1							
GARRISON, HEDY	8-	H. Garrison	1	2	6-	H Garrison	
8:00-6:00							

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

AY
CERTIFICATION OF ACCURACY
Supervisor: R. Law

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

DAY THURSDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE March 22, 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	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							Son is sick per
TYRA, SANDERS	8:55	T. Sanders	1-2	5:00		T. Sanders	
WYATT, LISETTE	9:00	L. Wyatt	1:30	2:30	5:00	L. Wyatt	
4 - 1							
GARRISON, HEDY	8-	H. Garrison	1	2	6	H. Garrison	Overnight 18th fl.
8:00-6:00							

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

CERTIFICATION OF ACCURACY


Supervisor: _____

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

DAY WEDNESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE March 21, 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	12-1	4:15	P. Caster		worked 7 hrs; <i>me</i>
8:30-4:30							
MEJIA, HADEE	8:30	Hadee Mejia	1-2	4:30	Hadee Mejia		
9:00-5:00							
BRUTON, RHONDA	9:30	R Bruton	2	3	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	
4 - 1							
GARRISON, HEDY	8-	H. Garrison	12	5-	H. Garrison		
8:00-5:00							

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

CERTIFICATION OF ACCURACY

Supervisor:

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

DAY TUESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE March 20, 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>see</i>
CASTER, PATRICIA							<i>C.T.</i>
8:30-4:30							
MEJIA, HADEE	8:30	<i>Hmejia</i>	1-2	4:30		<i>Hmejia</i>	
9:00-5:00							<i>see</i>
BRUTON, RHONDA							<i>Doctor's appointment</i>
TYRA, SANDERS	9:00	<i>T. Sanders</i>	1:15	2:15	5:00	<i>T. Sanders</i>	
WYATT, LISETTE	9:05	<i>Ruyatt</i>	1:00	2:00	5:00	<i>Ruyatt</i>	
4 - 1							<i>see</i>
GARRISON, HEDY	7:55	<i>Hedy Garrison</i>	1	2	2:00	<i>H. Garrison</i>	<i>Dis. appt.</i>
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 MONDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE March 19, 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	3:30		H. Mejia	1 hr c.i.t.
9:00-5:00							
BRUTON, RHONDA	9:30	R. Bruton	1	2	5	R. Bruton	
TYRA, SANDERS	9:00	T. Sanders	1-2	5:00		T. Sanders	
WYATT, LISETTE	9:00	L. Wyatt	1:00	2:00	5:00	R. Wyatt	
4 - 1							
GARRISON, HEDY							
8:00- :00							
DAY OFF							

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

CERTIFICATION OF ACCURACY

Supervisor: [Signature]