

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

DAY FRIDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Feb. 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							286 comp Time
8:30-4:30							
MEJIA, HADEE	8:30	Hmeja	1-2	3:30	Hmeja		1 hr C.T.
9:00-5:00							Per
BRUTON, RHONDA	12	R. Bruton			5	R. Bruton	
TYRA, SANDERS	9:10	T. Sanders			2:20	T. Sanders	Per
WYATT, LISETTE	9:00 am	L. Wyatt	1:00	2:00	4:40	L. Wyatt	2 hr 1 hr 1 hr 1 hr
							Per
4 - 1							
GARRISON, HEDY							In lieu of Monday
8:00-6:00							Per

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 THURSDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Feb. 15, 2001

DIST. # 5000

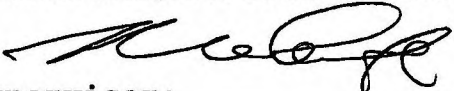
The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

REGULAR & 4-1 TIME SHEET

NAME	ARR	SIGNATURE	LUNCH		DEP	SIGNATURE	REMARKS
FULL TIME			out	in			
8:00-4:00							
CASTER, PATRICIA							Director's app 4
8:30-4:30							
MEJIA, HADEE	8:30	Hmejia	1-2	4:30		Hmejia	
9:00-5:00							
BRUTON, RHONDA							
TYRA, SANDERS	9:00	T. Sanders	1-2	5:00		T. Sanders	
WYATT, LISETTE	8:50	L Wyatt	1:00	2:00	5:00	L Wyatt	Field Hudon
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.

CERTIFICATION OF ACCURACY


Supervisor: _____



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

DAY WEDNESDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Feb. 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							<i>See</i>
CASTER, PATRICIA	8:00	<i>P. Caster</i>	12-1	7:30		<i>P. Caster</i>	3 1/2 hrs <i>at</i>
8:30-4:30							<i>See</i>
MEJIA, HADEE	8:30	<i>Hmejia</i>	1-2	7:00		<i>Hmejia</i>	2 1/2 hrs <i>0 11</i>
9:00-5:00							
BRUTON, RHONDA							<i>See</i> <i>8:00</i>
TYRA, SANDERS	9:00	<i>T. Sanders</i>	1-2	5:00		<i>T. Sanders</i>	
WYATT, LISETTE	9:00	<i>L. Wyatt</i>	12:30-1:30			<i>L. Wyatt</i>	Field <i>work</i>
4 - 1							
GARRISON, HEDY							<i>Clerical</i> <i>Collective</i> <i>Bargaining</i> <i>Caucus</i>
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 Feb 13, 2001

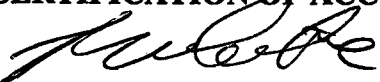
DIST. # 5000

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							New
CASTER, PATRICIA	8:00	P. Caster	12	1:430	P. Caster		5 hr (training) C.T. 10/16/01
8:30-4:30							New
MEJIA, HADEE	8:30	H. Mejia			1:00	H. Mejia	2 1/2 hrs S/C
9:00-5:00							
BRUTON, RHONDA	10	R. Bruton	12	1	5	R. Bruton	
TYRA, SANDERS	9:00	T. Sanders	1	2	5:00	T. Sanders	
WYATT, LISETTE	9:05	L. Wyatt	1:00	2:00	5:00	L. Wyatt	
4 - 1							
GARRISON, HEDY							Annual Leave
8:00-6:00							

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

Floating Holiday

DAY MONDAY

SECTION: ASBESTOS & LEAD PROGRAM

DATE Feb. 12, 2001

DIST. # 5000

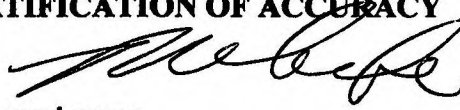
The undersigned certify that they were present and engaged in the business of the office during the hours placed opposite their respective names.

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	4:30	H. Mejia		
9:00-5:00							
BRUTON, RHONDA	11	R. Bruton	1-2	5	R. Bruton		
TYRA, SANDERS	9:15	T. Sanders	1-2	5:00	T. Sanders		
WYATT, LISETTE							will be in late H. P. C.
4 - 1							
GARRISON, HEDY	8-	H. Garrison	1-2	6-	H. Garrison		
8:00- :00		DAY OFF					

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

CERTIFICATION OF ACCURACY

Supervisor: 

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