

Job Stamp  
 04-0120F4  
 SFOBB SAS

Const. Calendar Day No. 618  
 Project Work Day No. 828  
 Date Friday 08/22/2008  
 Shift Hours Start \_\_\_\_\_ Stop \_\_\_\_\_

ASSISTANT RESIDENT ENGINEER'S CONTRACTOR - ABFJV

| EQUIPMENT AND/OR LABOR: |                       |  | HOURS - ITEM NO. |  |  |  |  |  |  |  |  |  | REMARKS |  |  |              |      |            |
|-------------------------|-----------------------|--|------------------|--|--|--|--|--|--|--|--|--|---------|--|--|--------------|------|------------|
| Equip. #                | N<br>O<br>M<br>E<br>N | DESCRIPTION<br><br>(Of Equipment or Labor) |                  |  |  |  |  |  |  |  |  |  |         |  |  | IDLE OR DOWN | Name | Contractor |
|                         |                       |  |                  |  |  |  |  |  |  |  |  |  |         |  |  |              |      |            |
|                         |                       |  |                  |  |  |  |  |  |  |  |  |  |         |  |  |              |      |            |
|                         |                       |  |                  |  |  |  |  |  |  |  |  |  |         |  |  |              |      |            |
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|                         |                       |  |                  |  |  |  |  |  |  |  |  |  |         |  |  |              |      |            |
|                         |                       |  |                  |  |  |  |  |  |  |  |  |  |         |  |  |              |      |            |
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|                         |                       |  |                  |  |  |  |  |  |  |  |  |  |         |  |  |              |      |            |
|                         |                       |  |                  |  |  |  |  |  |  |  |  |  |         |  |  |              |      |            |

No work—I was sick.

  
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 David Bradd, Assistant Resident Engineer