STATE OF CALIFORNIA
DEPARTMENT OF TRANSPORTATION
Form HC-10A (Rev. 6/80)

Job Stamp
04-0120F4
SFOBB SAS

Const. Calendar Day No. 836
Project Work Day No. 1046
Date **Saturday 3/28/2009**
Shift Hours Start _____ Stop _____

**ASSISTANT RESIDENT ENGINEER'S** **CONTRACTOR – ABFJV**

EQUIPMENT AND/OR LABOR:

| Equip. # | NO. MEN | DESCRIPTION (Of Equipment or Labor) | HOURS - ITEM NO. | | | | | | | | | IDLE OR DOWN | REMARKS Name | REMARKS Contractor |
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- **Weekend—No Work**

David Bradd, Assistant Resident Engineer

REC'D '09 APR-21 #009328