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

Job Stamp
04-0120F4
SFOBB SAS

Const. Calendar Day No. 35
Project Work Day No. 245
Date Tuesday 10/13/2009
Shift Hours Start _____ Stop _____

ASSISTANT RESIDENT ENGINEER'S CONTRACTOR – ABFJV

HOURS - ITEM NO.

EQUIPMENT AND/OR LABOR:

Equip. #	NO. MEN	DESCRIPTION (Of Equipment or Labor)										IDLE OR DOWN	REMARKS Name	Contractor

- **Sick Day—No Work**

David Bradd, Assistant Resident Engineer

REC'D H31 NOV-11 #011417