Date:5/2	24/21	23 En	nployee Name: GEORGE DRBY	
Room Number	r: <u>18</u>	20	ilding: EHS	
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Date: <u>5</u>	24/20	23 Empl	oyee Name: GEDRGE	KORBY	_	
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Equipment Please state		em you are experiencin	g with the equipment:			
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Date of Ann	roval Boar	d of Education		f Disposal	•	

Date: 5	124/21	023	Employee Name: GEORGE KEXBY	
Room Num	ber: 48	32	Building:	
Equipment Please state		em you are experi	encing with the equipment:	
ADE	5 NOT	WORK PRO	PERLY & DO NOT USE CASSETTE THE	65
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