CONTRACT: 9385 DATE: 11 / 6 / 19 PAGE: ____ of ____

S M T W T F S

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB Rt Ln MP 78.7±	5:00PM	8:30AM	15.5	AB35
I90 EB Lt Ln MP 81.2±	5:15PM	6:30AM	11.5	AB29
I90 WB MP 81.9±	6:00AM	5:00AM	11	WB
		TOTAL HOURS	38	

OFFICE USE: CHECKED BY: _____ EST. # _____

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385 DATE: 11 / 7 / 19 PAGE: ____ of ____

S M T W (T) F S

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7	8:00PM	3:00AM	7	AB35

TOTAL HOURS 7

OFFICE USE: CHECKED BY: ____________ EST. # ________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385

DATE: 11 / 11 / 19

S M T W T F S

PAGE: ____ of ____

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.9±	6:00PM	4:15AM	10.5	AB35

TOTAL HOURS 10.5

OFFICE USE: CHECKED BY: ____________ EST. # ________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385 DATE: 11 / 12 / 19 PAGE: ____ of ____

S M (T) W T F S

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7±	6:00PM	4:45AM	11	AB35

TOTAL HOURS: 11

OFFICE USE: CHECKED BY: ____________ EST. # ____________

TCS SIGNATURE: Dianna M. Savino INSPECTOR'S SIGNATURE: Dean A Long

CONTRACT: 9385 DATE: 11 / 13 / 19 PAGE: ____ of ____

S M T (W) T F S

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7±	5:00 PM	2:00 AM	9	AB35

TOTAL HOURS: 9

OFFICE USE: CHECKED BY: ______________ EST. # ________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385

DATE: 11 / 14 / 19

S M T W (T) F S

PAGE: ____ of ____

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7±	8:00PM	7:30AM	11.5	AB35

TOTAL HOURS 11.5

OFFICE USE: CHECKED BY: ____________ EST. # ________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385

DATE: 11 / 15 / 19

S M T W T (F) S

PAGE: ____ of ____

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7±	10:00 PM	2:45 AM	5	AB 35
		TOTAL HOURS	5	

OFFICE USE: CHECKED BY: ______________ EST. # __________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385 DATE: 11 / 19 / 19 PAGE: ____ of ____

S M (T) W T F S

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 EB MP 78.7± (Rt. Ln.)	10:00AM	~~7~~ 8:30PM DMS	~~8.5~~ 9.5 DMS	AB35
I 90 EB MP 78.7± (Lt Ln.)	5:45AM	7:00AM Continues to 11/20/19 SS	1	AB35

TOTAL HOURS ~~9.5~~ 10.5 DMS

OFFICE USE: CHECKED BY: ____________ EST. # ____________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385 DATE: 11/20/19 PAGE: ____ of ____

S M T W T F S

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
		5:30 PM		
I90 EB MP 78.7± (L)	7:00AM	~~5:30PM~~	10.5	AB35
I90 EB MP 78.7± (R)	6:00PM	4:30AM	10.5	AB35
		TOTAL HOURS	21	

OFFICE USE: CHECKED BY: _____ EST. # _____

TCS SIGNATURE: Rosina M Lawrence INSPECTOR'S SIGNATURE: Dean A Long

CONTRACT: 9385 DATE: 11 / 21 / 19 PAGE: ____ of ____

S M T W (T) F S

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7±	8:00 PM	1:00AM	5	AB 29
	1:00 AM	6:00AM	5	TMA#11

TOTAL HOURS 10

OFFICE USE: CHECKED BY: ____________ EST. # ____________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385

DATE: 12/2/19

S (M) T W T F S

PAGE: ____ of ____

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7±	6:00PM	3:30AM	9.5	AB#29

TOTAL HOURS 9.5

OFFICE USE: CHECKED BY: ____________ EST. # ____________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]

CONTRACT: 9385

DATE: 12/3/19

S M T W T F S

PAGE: ____ of ____

FIELD NOTE RECORD

SEQUENTIAL ARROW SIGN

Item No. 79 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 EB MP 78.7±	6:00 pm	11:30pm	5.5	AB29

TOTAL HOURS 5.5

OFFICE USE: CHECKED BY: ____________ EST. # ________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: [signature]