CONTRACT: 9385 DATE: 8 / 11 / 20 PAGE: ____ of ____

S M (T) W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84±	6AM	6AM	24	23
I 90 WB MP 84.6	530pm	8AM	14.5	13

TOTAL HOURS 38.5

OFFICE USE: CHECKED BY: ____________ EST. # ________

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

CONTRACT: 9385 DATE: 8 / 12 / 20 PAGE: ____ of ____

S M T (W) T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6AM	6AM	24	# 23
I 90 WB MP 84.6+	5 30 AM	7 PM	13.5	# 13
		TOTAL HOURS	37.5	

OFFICE USE: CHECKED BY: ______________ EST. # __________

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

CONTRACT: 9385 DATE: 8 / 13 / 20 PAGE: ____ of ____

S M T W (T) F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6AM	6AM	24	#23
I 90 WB MP 84.6+-	6:30 AM	7:30 AM	13	#13

TOTAL HOURS 37

OFFICE USE: CHECKED BY: ____________ EST. # ____________

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

CONTRACT: 9385 DATE: 8 / ~~15~~ 14 / 20 PAGE: ____ of ____

S M T W T (F) S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84	6AM	6AM	24	#23
I 90 WB MP 84.6+	12:30	1:30	1	#13
			TOTAL HOURS 25	

OFFICE USE: CHECKED BY: ____________ EST. # ________

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

CONTRACT: 9385 DATE: 8 / 15 / 20 PAGE: ____ of ____

S M T W T F (S)

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6AM	6AM	24 hrs	#23

TOTAL HOURS 24

OFFICE USE: CHECKED BY: ____________ EST. # ________

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

CONTRACT: 9385 DATE: 8 / 16 / 20 PAGE: ____ of ____

(S) M T W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+	6AM	6AM	24	#23
		TOTAL HOURS	24	

OFFICE USE: CHECKED BY: ______________ EST. # ____________

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

CONTRACT: 9385 DATE: 8 / 17 / 20 PAGE: ____ of ____

S (M) T W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6am	6am	24	#23
		TOTAL HOURS	24	

OFFICE USE: CHECKED BY: ____________ EST. # ________

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

CONTRACT: 9385 DATE: 8 / 18 / 20 PAGE: ____ of ____

S M (T) W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6AM	6AM	24	23
I 90 WB MP 84.6+	8 30 am	3pm	6.5	13
I 90 WB MP 84.6+	5 30 pm	8 AM	14.5	
		TOTAL HOURS	45	

OFFICE USE: CHECKED BY: ____________ EST. # ________

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

CONTRACT: 9385 DATE: 8 / 19 / 20 PAGE: ____ of ____

S M T (W) T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 WB MP 84+-	6AM	6AM	24	#23
I90 WB MP 84.6+-	5:30 pm	8:30 AM	15	

TOTAL HOURS 39

OFFICE USE: CHECKED BY: ________________ EST. # __________

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

CONTRACT: 9385 DATE: 8 / 20 / 20 PAGE: ____ of ____

S M T W (T) F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+	6am	6AM	24	23
I 90 WB MP 84.6+	6:30 pm	6:30 AM	12	13

TOTAL HOURS 36

OFFICE USE: CHECKED BY: ______________ EST. # __________

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

CONTRACT: 9385 DATE: 8 / 21 / 20 PAGE: ____ of ____

S M T W T (F) S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6am	6am	24	23
I 90 WB MP 84.6+-	7:30 pm	9:00 Am	13.5	13
		TOTAL HOURS	37.5	

OFFICE USE: CHECKED BY: ______________ EST. # __________

TCS SIGNATURE: [signature] INSPECTOR'S SIGNATURE: Dean A Long

CONTRACT: 9385 DATE: 8 / 22 / 20 PAGE: ____ of ____

S M T W T F (S)

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+	6AM	6AM	24	#23
		TOTAL HOURS	24	

OFFICE USE: CHECKED BY: ____________ EST. # ____________

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

CONTRACT: 9385 DATE: 8 / 23 / 20 PAGE: ____ of ____

(S) M T W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 WB MP 84+-	6am	6am	24	#23
		TOTAL HOURS	24	

OFFICE USE: CHECKED BY: ____________ EST. # ________

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

CONTRACT: 9385 DATE: 8 / 24 / 20 PAGE: ____ of ____

S (M) T W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6AM	6AM	24	23
I 90 WB MP 84.6+-	6 30 pm	8 30 AM	14	13

TOTAL HOURS 38

OFFICE USE: CHECKED BY: ____________ EST. # ____________

TCS SIGNATURE: Becky C[illegible] INSPECTOR'S SIGNATURE: Deant [illegible]

CONTRACT: 9385 DATE: 8 / 25 / 20 PAGE: ___ of ___

S M (T) W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84	6 AM	6 AM	24	23
I 90 WB MP 84.6	5:30 pm	8 AM	14.5	13
		TOTAL HOURS	38.5	

OFFICE USE: CHECKED BY: ___________ EST. # ___________

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

CONTRACT: 9385 DATE: 8 / 26 / 20 PAGE: ____ of ____

S M T (W) T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 60 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6am	6am	24	#23
I 90 WB MP 84.6+-	11:15AM	1:15pm	2	#13
		TOTAL HOURS	26	

OFFICE USE: CHECKED BY: _____ EST. # _____

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

CONTRACT: 9385 DATE: 8 / 27 / 20 PAGE: ____ of ____

S M T W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB mp 84+	6 AM	6 AM	24	#23
I 90 WB mp 84.6+	3 pm	4 pm	1	#13
			TOTAL HOURS	25

OFFICE USE: CHECKED BY: _____ EST. # _____

TCS SIGNATURE: Becky [signature] INSPECTOR'S SIGNATURE: Dean Long

CONTRACT: 9385 DATE: 8 / 28 / 20 PAGE: ____ of ____

S M T W T (F) S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84	6am	6am	24	# 23
		TOTAL HOURS	24	

OFFICE USE: CHECKED BY: ____________ EST. # ________

TCS SIGNATURE: ____________ INSPECTOR'S SIGNATURE: ____________

CONTRACT: 9385 DATE: 8 / 29 / 20 PAGE: ____ of ____

S M T W T F (S)

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+	6AM	6AM	24	#23

TOTAL HOURS 24

OFFICE USE: CHECKED BY: ____________ EST. # ________

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

CONTRACT: 9385 DATE: 8 / 30 / 20 PAGE: ____ of ____

S M T W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84±	6 AM	6 AM	24	# 23

TOTAL HOURS 24

OFFICE USE: CHECKED BY: ____________ EST. # ____________

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

CONTRACT: 9885

DATE: 8 / 31 / 20

PAGE: ____ of ____

S M T W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6AM	6AM	24	#23
I 90 EB MP 77.9	4 30pm	6 30AM	14	#1
		TOTAL HOURS	38	

OFFICE USE: CHECKED BY: _____ EST. # _____

TCS SIGNATURE: _____ INSPECTOR'S SIGNATURE: _____

CONTRACT: 9365 DATE: 9 / 1 / 20 PAGE: ____ of ____

S M (T) W T F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 30 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+-	6AM	6AM	24	#23
I 90 WB MP 84.6+-	8:30am	11 am	2.5	#13
I 90 EB MP 77.4+-	4:30pm	5:30am	13	#1

TOTAL HOURS 39.5

OFFICE USE: CHECKED BY: ____________ EST. # ____________

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

CONTRACT: 9385   DATE: 9 / 2 / 20   PAGE: ____ of ____

S M T W (T) F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80   Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84	6 AM	6 AM	24	23
I 90 EB MP 77.4	5:30pm	6:30AM	13	#1
		TOTAL HOURS	~~24~~ 37	

OFFICE USE: CHECKED BY: ____________ EST. # ____________

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

CONTRACT: 9385 DATE: 9 / 3 / 20 PAGE: ___ of ___

S M T W (T) F S

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I 90 WB MP 84+	6AM	6AM	24	# 23
I 90 EB MP 77.4	7 30 pm	5 30 Am	10	# 1

TOTAL HOURS 34

OFFICE USE: CHECKED BY: ______________ EST. # __________

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

CONTRACT: 9385 DATE: 9 / 4 / 20 PAGE: ___ of ___

S M T W T F (S)

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90WB MP 84+	6AM	6AM	24	#23
		TOTAL HOURS	24	

OFFICE USE: CHECKED BY: ____________ EST. # ____________

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

CONTRACT: 9385 DATE: 9 / 5 / 20 PAGE: ____ of ____

S M T W T F (S)

FIELD NOTE RECORD

PORTABLE CHANGEABLE MESSAGE SIGN

Item No. 80 Group No. 1

Location	Time-In	Time-Out	Hours	Equipment Identification
I90 WB MP 84+-	6AM	6AM	24	#23
			TOTAL HOURS	24

OFFICE USE: CHECKED BY: ______________ EST. # ______________

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