**TODAYS DATE:** 4/20/20

**Halie Hill**

**Please answer the following questions listed below. Sign your name and initial in the appropriate column.**

**1) Do you have a fever, cough, shortness of breath or any other flu-like symptoms?**

**2) Have you recently travelled internationally including Europe and Asian countries?**

**3) Have you come in contact with anyone in the last 15 days that has the Covid-19 virus?**

*If you have answered YES to any of these questions You must not come to work for at least 15 days and /or return with a doctor's note giving you an OK to return to work.*

| Employee Name | Agency | Employee Signature | Dept | Yes (initial) | No (initial) | If Yes, Describe | Status |
|---|---|---|---|---|---|---|---|
| Marisol Simpson | OA | | OP- Day Shift | | | | Home |
| Halie Hill | OA | Halie Hill | OP- Day Shift | | HH | | Working |
| Kendra Smith | Kelly | [illegible] | OP- Day Shift | | KS | | Working |
| Danielle Johnson | Kelly | Danielle [illegible] | OP- Day Shift | | DJ | | Working |
| Teresa Griffin | StaffChex | Teresa G | OP- Day Shift | | TG | | Working |
| Gerald King | OA | Gerald King | Guard | | GK | | Working |
| JoAnn Harris | Randstad | JHarris | Scan Clerk | | JH | | Working |
| Dana Jones | OA | | Gate Clerk | | | | PTO |
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**TODAYS DATE:** April 17, 2020

**Halie Hill**

**Please answer the following questions listed below. Sign your name and initial in the appropriate column.**

1) Do you have a fever, cough, shortness of breath or any other flu-like symptoms?

2) Have you recently travelled internationally including Europe and Asian countries?

3) Have you come in contact with anyone in the last 15 days that has the Covid-19 virus?

*If you have answered YES to any of these questions You must not come to work for at least 15 days and /or return with a doctor's note giving you an OK to return to work.*

| Employee Name | Agency | Employee Signature | Dept | Yes (initial) | No (initial) | If Yes, Describe | Status |
|---|---|---|---|---|---|---|---|
| Marisol Simpson | OA | | OP- Day Shift | | | | Not work |
| Halie Hill | OA | Halie Hill | OP- Day Shift | | HH | | working |
| Kendra Smith | Kelly | | OP- Day Shift | | KS | | Working |
| Danielle Johnson | Kelly | | OP- Day Shift | | DJ | | working |
| Teresa Griffin | StaffChex | | OP- Day Shift | | TG | | working |
| Gerald King | OA | | Guard | | GK | | working |
| JoAnn Harris | Randstad | | Scan Clerk | | | | Not work |
| Dana Jones | OA | Dana Jones | Gate Clerk | | DJ3 | | working |
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**TODAYS DATE:** 4/16/20

**Halie Hill**

**Please answer the following questions listed below. Sign your name and initial in the appropriate column.**

1) Do you have a fever, cough, shortness of breath or any other flu-like symptoms?

2) Have you recently travelled internationally including Europe and Asian countries?

3) Have you come in contact with anyone in the last 15 days that has the Covid-19 virus?

*If you have answered YES to any of these questions You must not come to work for at least 15 days and /or return with a doctor's note giving you an OK to return to work.*

| Employee Name | Agency | Employee Signature | Dept | Yes (initial) | No (initial) | If Yes, Describe | Status |
|---|---|---|---|---|---|---|---|
| ~~Marisol Simpson~~ | ~~OA~~ | | ~~OP- Day Shift~~ | | | | Not Working |
| Halie Hill | OA | Halie Hill | OP- Day Shift | | HH | | Working |
| Kendra Smith | Kelly | KSmith | OP- Day Shift | | KS | | Working |
| Danielle Johnson | Kelly | DJ | OP- Day Shift | | DJ | | Working |
| Teresa Griffin | StaffChex | TGriffin | OP- Day Shift | | TG | | Working |
| Gerald King | OA | GKing | Guard | | GK | | Working |
| JoAnn Harris | ~~Randstad~~ | | ~~Scan Clerk~~ | | | | Not Working |
| Dana Jones | OA | DJones | Gate Clerk | | DJS | | Working |

**TODAYS DATE:** 4-14-20

Halie Hill

**Please answer the following questions listed below. Sign your name and initial in the appropriate column.**

1) Do you have a fever, cough, shortness of breath or any other flu-like symptoms?

2) Have you recently travelled internationally including Europe and Asian countries?

3) Have you come in contact with anyone in the last 15 days that has the Covid-19 virus?

*If you have answered YES to any of these questions You must not come to work for at least 15 days and /or return with a doctor's note giving you an OK to return to work.*

| Employee Name | Agency | Employee Signature | Dept | Yes (initial) | No (initial) | If Yes, Describe | Status |
|---|---|---|---|---|---|---|---|
| ~~Marisol Simpson~~ | ~~OA~~ | | ~~OP- Day Shift~~ | | | | Not working |
| Halie Hill | OA | Halie Hill | OP- Day Shift | | Hh | | working |
| Kendra Smith | Kelly | [signature] | OP- Day Shift | | KS | | working |
| Danielle Johnson | Kelly | DJ | OP- Day Shift | | DJ | | Working |
| Teresa Griffin | StaffChex | T. Griffin | OP- Day Shift | | TG | | Working |
| Gerald King | OA | | Guard | | | | |
| ~~JoAnn Harris~~ | ~~Randstad~~ | | ~~Scan Clerk~~ | | | | Not working |
| Dana Jones | OA | Dana Jones | Gate Clerk | | DJ | | working |
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