EPS MOE Form F4 Report

School: East Spring Primary School	**Month:** May
Vector Control Technicians/ Workers Names:	**Work Performed**
Azlam Shah Alias,Avinan Avinan,Team member A1,Team member A2,Team member B1,Team member B2,Team member C1,Team member C2,Team member D1,Team member D2,	**Type of Services** / **No of Services Performed**
	Common Pest: 136
	Mosquitoes: 136
	Subterranean Termites: 136
	All Pest: 136

Week	Date of Visit	Checkpoint 1	Checkpoint 2	Checkpoint 3	Checkpoint 4	Checkpoint 5	Checkpoint 6	Checkpoint 7	Checkpoint 8	Checkpoint 9	Checkpoint 10	Checkpoint 11	Checkpoint 12	Checkpoint 13	Checkpoint 14	Checkpoint 15
1st	**2022-05-04**	13:00	13:03	13:06	13:09	13:12	13:15	13:18	13:21	13:24	13:27	13:30	13:33	13:36	13:39	13:42
1st	**2022-05-05**	11:49	11:51	11:53	11:55	11:56	11:57	11:59	12:01	12:02	12:04	12:05	12:08	12:10	12:11	12:14
2nd	**2022-05-11**	10:30	10:33	10:36	10:39	10:42	10:45	10:48	10:51	10:54	10:57	11:00	11:03	11:06	11:09	11:12
2nd	**2022-05-12**	14:02	14:04	14:06	14:08	14:10	14:12	14:14	14:16	14:18	14:20	14:22	14:24	14:26	14:28	14:30
3rd	**2022-05-17**	11:26	11:28	11:30	11:32	11:34	11:36	11:38	11:40	11:42	11:44	11:46	11:48	11:50	11:52	11:54
3rd	**2022-05-19**	12:01	12:03	12:05	12:07	12:09	12:11	12:13	12:15	12:17	12:19	12:21	12:23	12:25	12:27	12:29
4th	**2022-05-23**	13:04	13:06	13:08	13:10	13:12	13:14	13:16	13:18	13:20	13:22	13:24	13:26	13:28	13:30	13:32
4th	**2022-05-26**	12:53	12:55	12:57	12:59	13:01	13:03	13:05	13:07	13:09	13:11	13:13	13:15	13:17	13:19	13:21
5th	**2022-05-30**	13:55	13:58	14:00	14:02	14:04	14:06	14:08	14:10	14:12	14:14	14:16	14:18	14:20	14:22	14:24
5th																
6th																
6th																

Acknowledged by Managing Agent