EPS MOE Form F4 Report

School: Former Macpherson Primary & Secondary School	**Month:** May
Vector Control Technicians/ Workers Names: 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,	**Work Performed**

Type of Services	No of Services Performed
Common Pest	126
Mosquitoes	126
Subterranean Termites	126
All Pest	126

Week	Date of Visit	Checkpoint 1 checkpoint	Checkpoint 2 checkpoint	Checkpoint 3 checkpoint	Checkpoint 4 checkpoint	Checkpoint 5 checkpoint	Checkpoint 6 checkpoint	Checkpoint 7 checkpoint	Checkpoint 8 checkpoint	Checkpoint 9 checkpoint	Checkpoint 10 checkpoint	Checkpoint 11 checkpoint	Checkpoint 12 checkpoint	Checkpoint 13 checkpoint	Checkpoint 14 checkpoint	Checkpoint 15 checkpoint
1st	**2022-05-04**	17:00	17:03	17:06	17:09	17:12	17:15	17:18	17:21	17:24	17:27	17:30	17:33	17:36	17:39	17:42
1st	**2022-05-06**	14:06	14:09	14:12	14:15	14:18	14:21	14:24	14:27	14:30	14:33	14:36	14:39	14:42	14:45	14:48
2nd	**2022-05-11**	13:00	13:05	13:10	13:15	13:20	13:25	13:30	13:35	13:40	13:45	13:50	13:55	14:00	14:05	14:10
2nd	**2022-05-13**	15:50	15:53	15:56	15:59	16:02	16:05	16:08	16:11	16:14	16:17	16:20	16:23	16:26	16:29	16:32
3rd	**2022-05-17**	16:06	16:09	16:12	16:15	16:18	16:21	16:24	16:27	16:30	16:33	16:36	16:39	16:42	16:45	16:48
3rd	**2022-05-20**	16:00	16:03	16:06	16:09	16:12	16:15	16:18	16:21	16:24	16:27	16:30	16:33	16:36	16:39	16:42
4th	**2022-05-25**	12:50	12:54	12:58	13:02	13:06	13:10	13:14	13:18	13:22	13:26	13:30	13:34	13:38	13:42	13:46
4th	**2022-05-28**	10:33	10:33	10:34	10:35	10:35	10:36	10:37	10:38	10:38	10:39	10:40	10:41	10:48	10:56	10:57
5th																
5th																
6th																
6th																

Acknowledged by Managing Agent