ANNOUNCEMENT

Safety Meeting

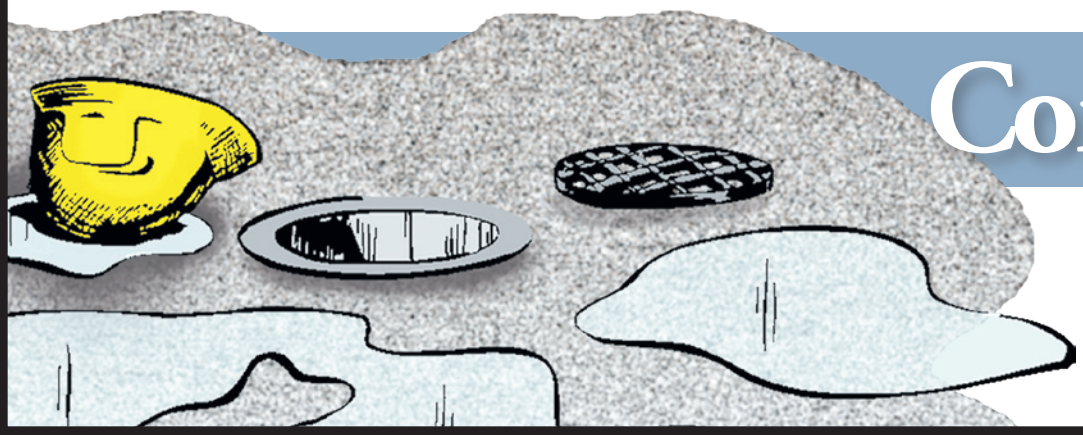
Date:_____ **Time:**_____

Location:_____

Topic: _____

Presenter: _____

Department: _____



Confined Spaces

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