



**Office of Management and  
Enterprise Services**

**Training Attendance Form**

Date: 2/15/2018 Time: 1300 Location: 5005 Training Room

Course Subject: **Works editing class**

Recorded By: Linda Powell/Cindi Reisman

Presented By: Linda Powell/Cindi Reisman

CEU: 2

#	Name		Agency		Attendee Signature/Employee ID #	Email Address
	Name	Number	Name			
1	Davis, Jeremy	560	PHARM BD			
2	Devine, Loren	922	OHFA			
3	Holloway, Cindy	090	OMES			
4	Northern, Kiana	650	ODVA			
5	Ridener, Keevie	560	PHARM BD			
6	Sutton-Bolling, Shana	090	OMES			
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