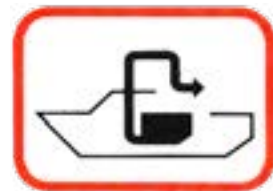




SC-CVA Pumpout Usage Log



Employee Name: _____ FY Year: _____ Quarter: _____

DATE	BOAT NAME	BOAT LENGTH (FT)	QTY PUMPED	FEE COLLECTED	PUMP OUT TIME (MIN)	STAFF MEMBER
TOTAL						

Certified by: _____ Date: _____

Facility Name: _____ Hourly Rate: _____