

# IDDE

a grate concern

## Acknowledgment of Training

(This top section should be filled in by the trainer)

Signature(s) below are acknowledgment that on (date) 11/22/24,  
these individuals participated in a training session at the:

Location Name: \_\_\_\_\_

Address: \_\_\_\_\_

Given by: (trainer's name) \_\_\_\_\_

(title) \_\_\_\_\_

This training session presented information on illicit discharge detection and elimination.  
During this session, the individuals listed below viewed the training video:

### IDDE: a grate concern

The participants' signatures below affirm they were given adequate time to ask questions about  
their particular job activities and how they could best conduct these activities.

Please read the above paragraph before signing below.

PRINT NAME HERE

SIGNATURE HERE

Harlan L Friedrichson  
Robbie Nichols  
Noe Sandom  
Francisco Hernandez  
Daniel Avalos  
Gerardo Perez  
Armando. Puentes  
Armando Chavez  
Juan Jimenez  
Miguel Jaime  
Anthony Chali  
Estive Montes  
Mirsa Sierra

Harlan L Friedrichson  
Robbie Nichols  
Noe Sandom  
Francisco Hernandez  
Daniel Avalos  
Gerardo Perez  
Armando Puentes  
Armando Chavez  
Juan Jimenez  
Miguel Jaime  
Anthony Chali  
Mirsa Sierra