



CONSTRUCTORS' LABOR COUNCIL OF WEST VIRGINIA, INC.

POST OFFICE BOX 297 • SCOTT DEPOT, WEST VIRGINIA 25560
P (304) 342-6107 • F (304) 342-6108
www.clcwv.com

CLC Safety Committee Business Sessions 2014/2015 Winter Schedule

The CLC Safety Committee sponsored 2014/2015 business session schedule is as follows:

2014

Tuesday, December 16, 2014 beginning at 10:00 a.m.
OSHA New Standard Review (Rich Jeffries-OSHA)
Location: Operating Engineers Local 132
2nd Floor Conference Room
606 Tennessee Avenue
Charleston, West Virginia 25302

2015

Wednesday, January 7, 2014 beginning at 8:00 a.m.
Crosby Rigging training (Bob Graham-The Crosby Group)
Location: Offices of All Crane & Equipment Rental Corp.
140 West 19th Street
Nitro, West Virginia 25143

Please check the CLC website (<http://www.clcwv.com/>) for updates to the schedule. The scheduled dates are subject to change.

Please **REGISTER** by completing the attached form, and emailing it to Mary Prim at mary@maryprim.com or Jason Thomas at JThomas@allcraneequipment.com.

Please feel free to call us with any questions.

Sincerely,

Constructors' Labor Council of West Virginia, Inc.

2014 Board of Directors

*Mike Durst – President • William Howes – Vice-president
Paul Turman – Secretary • Ken Lake – Treasurer • Bob Brookover – Director
Joe Catena – Director • D.W. Daniel, Jr. – Director • Jason Kitzmiller – Director
Brett Mondy – Director • Chad Shamblin – Director • Doug Thomas – Director*

REGISTRATION FOR 2014/2015 SAFETY COMMITTEE BUSINESS SESSION

OSHA NEW STANDARD REVIEW (Rich Jeffries-OSHA)

Tuesday, December 16, 2014 beginning at 10:00 a.m.

Location: Operating Engineers Local 132
 2nd Floor Conference Room
 606 Tennessee Avenue
 Charleston, West Virginia 25302

NUMBER OF THOSE ATTENDING: _____

Name(s) of Attendee(s): _____

Company Name: _____

Phone Number: _____

Email: _____

CROSBY RIGGING TRAINING (Bob Graham-The Crosby Group)

Wednesday, January 7, 2014 beginning at 8:00 a.m.

Location: Offices of All Crane & Equipment Rental Corp.
 140 West 19th Street
 Nitro, West Virginia 25143

NUMBER OF THOSE ATTENDING: _____

Name(s) of Attendee(s): _____

Company Name: _____

Phone Number: _____

Email: _____