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| **Company Name:**  **Nombre de la compañía** | | | | | | | |
| **Task, Job Title or Equipment Used: Pesticide Use**  **Tarea, cargo o equipo utilizado: Uso de pesticidas** | | | | | | | |
| **Trabajador** | **Fecha** | **RA Revisado** | **SWP Revisado** | **Procedimiento de emergencia** | **Competencia** | **Primer Supervisor Nota Siguiente Competencia (Incluir Fecha)** | **Firma**  **Supervisor** |
| **Translator:** |  |  |  |  |  |  |  |
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