

C. E. Thurston & Sons Asbestos Trust - Site Verification Spreadsheet Instructions

Please enter the following information:

Law Firm or Claimant without attorney: _____

Contact Name: _____

Telephone Number: _____

Please enter the sites that you want considered in the fields on the next page.

<u>Field</u>	<u>Explanation</u>
Customer	Name of company or entity where occupational exposure occurred
City	Not required for shipboard exposure.
State	Not required for shipboard exposure.
Jobsite	Plant, site or ship name
BegDt	Date of first presence of Thurston asbestos at site
EndDt	Date of last presence of Thurston asbestos at site, or 12/31/81, whichever is earlier
Reference	Reference such as Website URL or attached document name with page reference
Ship Designator	Use for navy ships, e.g. DD-941
Notes	Any notes which may be useful.
Country	Enter only if not U.S. (There are no known qualifying sites outside of the U.S.)

You may add other fields if needed.