What is your name?

Catherine Chronos

Where are you located?

2320 Newport St
San Mateo CA

WHOMP regulations require that machinery, lab benches, and workstations within the facility be placed sufficiently far apart to maximize the chance of replication of future accidents.

We have scanned your facility and noticed certain special requirements. Four areas in the lab, marked with an "X" below, are already damaged and workstations may not be located there (although they may be adjacent). One area, marked with a black square, is directly underneath the ceiling fan and at least part of a workstation must be located there.

Indicate, on the floor plan below, the proposed placement of:

Four stations of dimensions 1 × 1
Three stations of dimensions 2 × 1
Two stations of dimensions 3 × 1
One station of dimensions 4 × 1
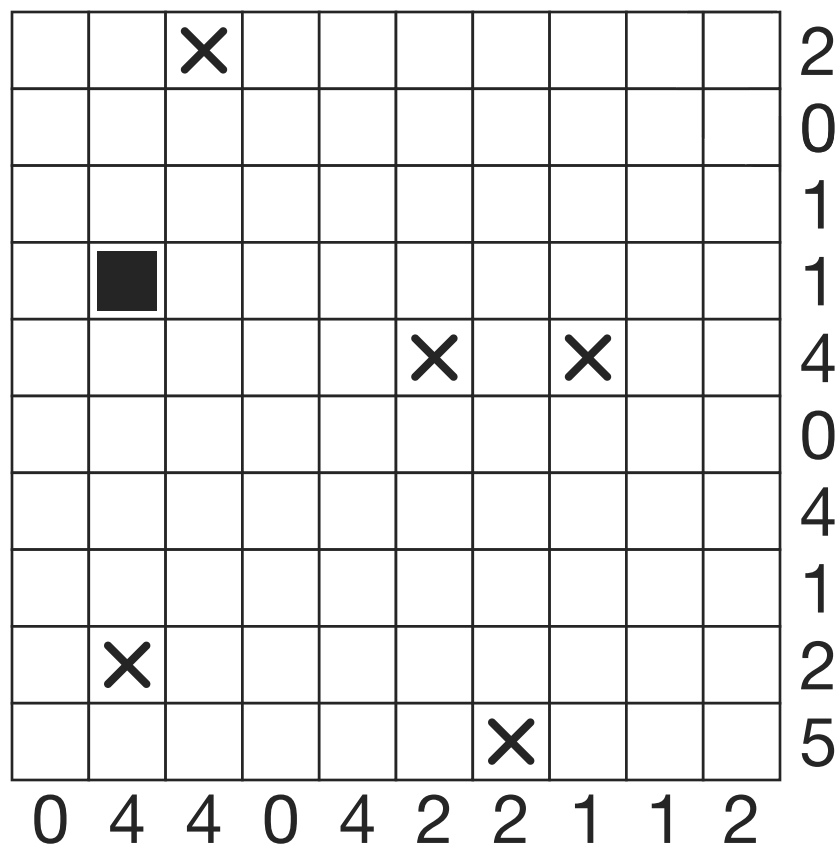
Stations may only be oriented horizontally or vertically. **No stations may be adjacent to each other, even diagonally.** For example, the four spaces diagonally next to the ceiling fan cannot possibly contain workstation components as then two stations would have to be adjacent.

The numbers to the right of rows and underneath the columns specify the maximum amount of floor space that may be used within the corresponding row or column.

Row totals (top to bottom): 2, 0, 1, 1, 4, 0, 4, 1, 2, 5

Column totals (left to right): 0 4 4 0 4 2 2 1 1 2

Redundant Extraneous Department of Task and Paperwork Enforcement
Product Line Inspection Form F212015-S89119

The Redundant Extraneous Department of Task and Paperwork Enforcement (REDTaPE), as part of its required redundancy mandate, requires that each of the <u>six</u> product lines (the rows below) pass six separate safety and security inspections (numbered 1-6). Enter the numbers 1-6 in each of the cells of each row to indicate the sequence that each product line will undergo each inspection, such that each row contains six differently-numbered safety inspections, all of which differ from each other and are in the range 1-6.

Name of Applicant (name of the person filling out this form):

Catherine Chronos

Address of Organization (where we can send your organization mail):

2320 Newport St

City and State (the city and state where your organization is located):

San Mateo CA

During one shift (indicated by a column) each one of the six differently-numbered inspection machines (which are numbered from 1 to 6) can only inspect one single product line at a time. For maximum efficiency, each of the six differently numbered inspection machines must be operating during each shift. This means each column must contain only numbers from 1 to 6 and they all must be different, as the numbers represent the types of inspection machine as well as the corresponding safety and security inspection that machine does; for example, the machine numbered 3 does the security inspection numbered 3, and cannot be active in more than one location at each time -- so the numbers in each column must be all different.

Some sections of the schedule may already be filled in with numbers. Any number already filled in represents a machine with that number that must be assigned to that shift (column) at that specific time (row) and cannot be changed.

If there is an inequality symbol between shifts within a product line, or between adjacent machines operating at the same time, then the numbers for those inspection machines (which are the same as the safety and security inspection number) must be obeyed appropriately, with the inequality symbol obeying its standard mathematical definition as applied to positive integers (for more information, see REDTaPE pamphet I142051816185209147-T85-I145172111292025-S251321512, "Interpreting the Inequality Symbol").

```
[  ] [  ] [  ] [  ] > [  ] < [  ]
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[  ] > [  ] > [  ] < [  ] < [  ] [  ]
 ^                              ^
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       v    ^
[  ] < [  ] > [  ] [ 3 ] [  ] > [  ]
```

Name: _Catherine Chronos_

Address: _2320 Newport St_

City, State: _San Mateo CA_

Patrol Application Form H11989

Thank you for considering the Laotian Coast Guard for your security needs! We have done a precursory analysis of your proposed new buildings and their security patrol requirements, which have been mapped below. You will need to come up with a patrol plan for your building complex. Please draw in new patrol lines connecting these new buildings such that they obey the restrictions listed to the right.

③ ③   ④   ③

   ③   ③

③   ②

   ③   ④   ④ ② ④

              ④ ③

   ② ③

         ③ ④

                  ③

②   ② ③ ③

   ②   ③ ③
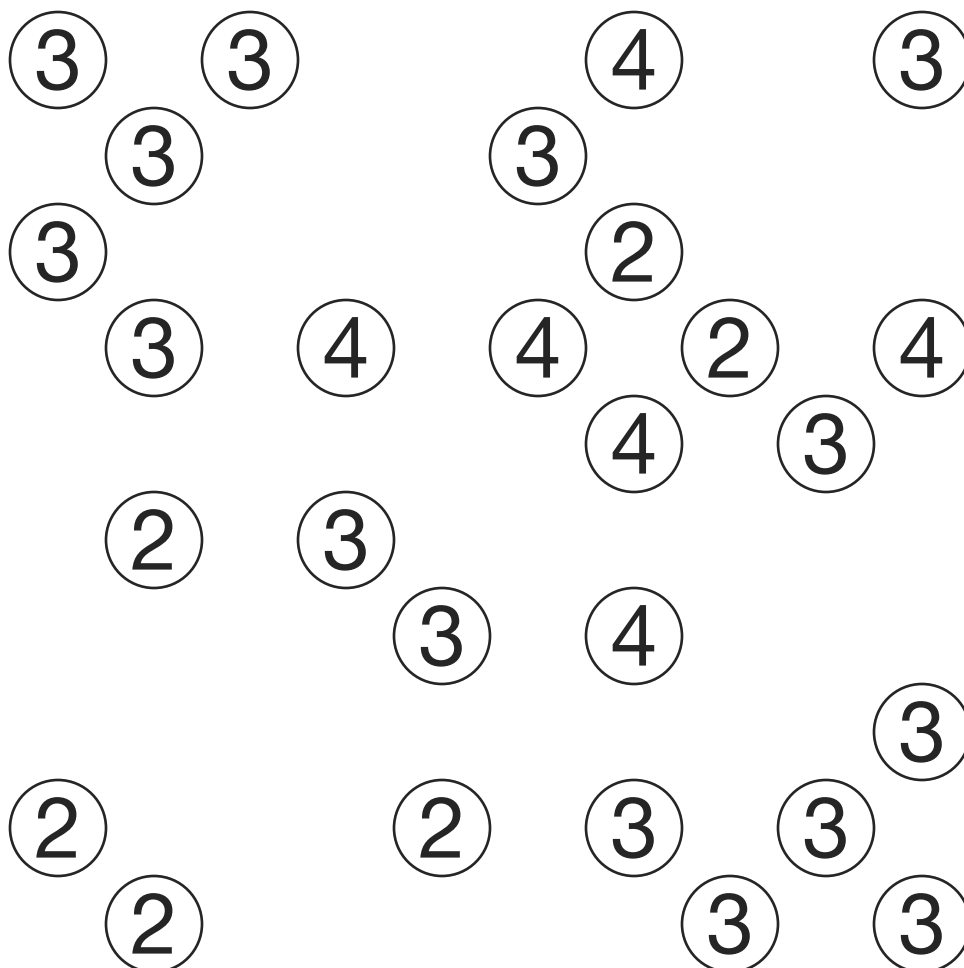
° Each patrol line only goes east-west or north-south (not both), and is stopped at each end by a building (which it services).
° Each building's number indicates the exact number of patrol lines servicing that building (that would be the security patrol require-ment), no more, no less.
° Patrol lines may never cross each other (we are worried about friendly fire).
° No pair of buildings may be serviced by more than two patrol lines servicing those two buildings directly (when we send more than two soldiers on the same mission, they start losing their self-esteem).
° From each building, it must be possible to reach any other building by a series of connected patrol lines and other buildings (in other words, everything is connected so that you are not vulnerable to a "divide-and-conquer" attack).

Application Form KA11211815

Contact: *Catherine Chronos*

Address: *2320 Newport St*

City/State: *San Mateo CA*

The Laundry, as part of ▓▓▓▓▓▓▓▓▓▓ regulate, ▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓
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▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓ sum of the numbers ▓▓▓▓▓▓▓▓▓

Only ▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓▓ test. Thank you.

Form KE14-K514 (EZ)	**Chronological Research Lab Operating Budget**		OMB No. 11514-11514
Department of the Treasury Internal Revenue Service	☐ Authorized by the Bureau of Asynchronous Time Standardization, Handling, Infrastructure, and Taxation (B.A.T.S.H.I.T.)	(B.A.T.) LIH₂	**20****12** Attachment Sequence No. **4**

Chief Point of Contact	Street Address	City and State
Catherine Chronos	2320 Newport St	San Mateo CA

Instructions

Part I — Please read Instructions before filling out section.

Internal Revenue Service regulations require appropriate declaration of laboratory operational budgets. Fortunately, we here at B.A.T.S.H.I.T. are here to help you through by providing this simplified version of IRS Form KE14-K514-EZ. Simply enter the appropriate dollar amounts (in multiples of $1000) in Part I so that each of the 36 cells are filled with either $1000, $2000, $3000, $4000, $5000, or $6000, and that each dollar amount appears exactly once in each row and column. Then follow the simple steps in Part II. We have pre-filled out the correct values at certain steps; if your calculated values match, then you have filled out the form correctly.

	(a) Budget	(b) Budget	(c) Budget	(d) Budget	(e) Budget	(f) Budget
1 Expenses	,000	,000	,000	,000	,000	,000
2 Expenses	,000	,000	,000	,000	,000	,000
3 Expenses	,000	,000	,000	,000	,000	,000
4 Expenses	,000	,000	,000	,000	,000	,000
5 Expenses	,000	,000	,000	,000	,000	,000
6 Expenses	,000	,000	,000	,000	,000	,000

Part II — Determining Necessary Checkpoints and Budget Limitations

#	Instruction	Value		#	Instruction	Value
7	Enter row 1, column (a) or row 1, column (b), whichever is larger			26	**Multiply** row 24 by row 25 and enter the value here	6,000,000.
8	Enter row 1, column (a) or row 1, column (b), whichever is smaller			27	Enter row 4, column (a) or row 4, column (b), whichever is larger	
9	**Divide** row 7 by row 8 and enter the value here	5.		28	Enter row 4, column (a) or row 4, column (b), whichever is smaller	
10	Enter the value from row 1, column (c)			29	**Subtract** row 28 from row 27 and enter the value here	2,000.
11	Enter the value from row 2, column (c)			30	Enter the **sum** of row 5, column (e) and row 5, column (f)	
12	**Multiply** row 10 by row 11 and enter the value here	12,000,000.		31	Enter the value from row 4, column (f)	
13	Enter the **sum** of row 1, column (d) and row 1, column (e)			32	**Add** row 30 to row 31 and enter the value here	13,000.
14	Enter the value from row 2, column (e)			33	Enter the value from row 5, column (a)	
15	**Add** row 13 to row 14 and enter the value here	13,000.		34	Enter the value from row 6, column (a)	
16	Enter the value from row 1, column (f)			35	**Add** row 33 to row 34 and enter the value here	10,000.
17	Enter the value from row 2, column (f)			36	Enter the **sum** of row 5, column (b) and row 6, column (b)	
18	**Multiply** row 16 by row 17 and enter the value here	10,000,000.		37	Enter the value from row 6, column (c)	
19	Enter the **sum** of row 2, column (a) and row 2, column (b)			38	**Add** row 36 to row 37 and enter the value here	7,000.
20	Enter the value from row 3, column (a)			39	Enter the value from row 5, column (d)	
21	**Add** row 19 to row 20 and enter the value here	9,000.		40	Enter the value from row 6, column (d)	
22	Enter the **sum** of row 3, col. (b), rows 3-5, col. (c), and rows 2-4, col. (d)			41	**Multiply** row 39 by row 40 and enter the value here	20,000,000.
23	**Add** row 22 to row 4, column (e) and enter the value here	25,000.		42	Enter row 6, column (e) or row 6, column (f), whichever is larger	
24	Enter the value from row 3, column (e)			43	Enter row 6, column (e) or row 6, column (f), whichever is smaller	
25	Enter the value from row 3, column (f)			44	**Divide** row 42 by row 43 and enter the value here	5.

For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 11514 Form KE14-K514 (EZ)

X-COMM

NAME Catherine Chronos
ADDR. 2320 Newport St
CITY&St. San Mateo CA

Tachyonic and Neutrino Decontamination Proposal Form
M9145-S235516518

As tachyonic and neutronic radiation are the only known forms of radiation to potentially exhibit faster-than-light (FTL) properties, X-Com regulations require all facilities processing industrial tachyons and/or neutrinos to perform temporal decontamination cycles according to a proposed schedule so as to decrease transmission of information to extra-terrestrial locations.

Temporal decontamination schedules must be carefully regulated as they can cause causality effects on both the week before and the week after a scheduled decontamination cycle. Because of the dangers of such causality issues, each quarterly schedule must be proposed at least four months in advance.

The calendar to the right shows the months of August 2012 to October 2012. Cleanly label some of the days in the calendar to indicate when the temporal decontamination cycles will be performed. The numbers indicate how many neighboring days (in any of the 8 adjacent directions) must have a decontamination cycle scheduled (Saturdays and Sundays are not considered adjacent—if there is a God out there, He works in mysterious ways). A day with a number cannot have a decontamination cycle.

AUGUST

			1: 2	2:	3: 3	4:
5: 0	6:	7:	8: 3	9:	10:	11:
12:	13:	14:	15: 3	16:	17:	18: 0
19:	20: 1	21: 3	22:	23: 3	24: 2	25:
26: 1	27:	28:	29:	30: 3	31:	1:

SEPTEMBER

2:	3: 4	4:	5: 3	6: 2	7:	8: 3
9: 2	10:	11:	12: 4	13: 3	14: 4	15:
16:	17:	18:	19:	20:	21:	22:
23: 0	24: 1	25: 3	26: 4	27:	28: 5	29:
30:	1:	2:	3:	4: 3	5: 3	6:

OCTOBER

7: 0	8: 1	9: 3	10:	11: 3	12:	13:
14:	15:	16:	17: 4	18:	19: 5	20:
21:	22:	23:	24: 4	25:	26:	27:
28:	29: 2	30:	31: 3			

GEE

POC Appellation

Catherine Chronos

Organization Address

2320 Newport St
San Mateo CA

Operating permits will only be granted to businesses whose worker schedules conform to Government Efficient Enterprise regulations.
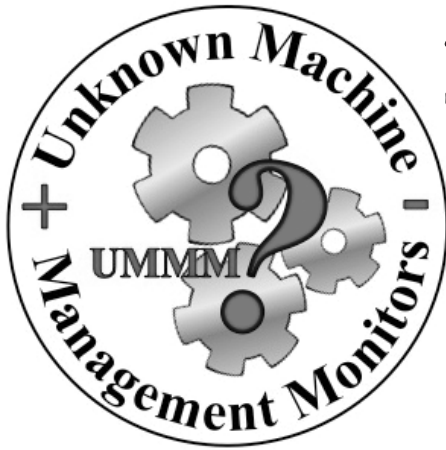
Enter the proposed schedule of six workers (rows) over the six work shifts (columns) by marking the appropriate cells.

The row headings indicate the duration(s) of each worker's shift(s). For example, "1 2 1" <u>indicates</u> that the worker must work three shifts; the first shift must be of duration 1, the second shift must be of duration 2, and the third shift must be of duration 1. Between shifts there must be a rest period with duration of at least 1.

The column headings indicate how many workers must be on duty each shift. For example, "1 2" indicates that three workers total must be scheduled on that shift, in groups of 1 and 2. Two groups must be separated by at least one blank row.

	2 2	1 2	2 1	2 2	1 1	2 2
1 1 1						
1 2 1						
1 1 1						
1 1						
2 3						
2 1						

Zoning Permit Application
S129208518-L91411

Contact
Catherine Chronos

Address
2320 Newport St

City/State
San Mateo CA

Facilities generating temporal-spatial flux must build a tachyonic radiation dissipation loop. Connect neighboring dots in the map below to describe the proposed path of your facility's dissipation loop.

However, preliminary research shows a tentative link between such radiation and movie spoilers (as well as fetal development defects). So local zoning regulations limit the amount of such industrial waste that may be emitted along the border of each neighborhood (i.e., the squares defined by the dots on the map). The numbers within each square-shaped cell defined by the corner of four nearby dots define the precise number of each neighborhood's border segments to be included in such a dissipation loop.

Note that multiple tachyonic radiation dissipation loops interact with each other in irregular ways; therefore, it is prohibited to have multiple loops. There can be only a single dissipation loop.