

DAILY TIME RECORD

NAME

For the month of

Office hours of Arrival

Regular Days:

Saturdays:

DAY	A.M.		P.M.		OVERTIME			LATE/UT	
	IN	OUT	IN	OUT	IN	OUT	Hr:Min	Hr:Min	
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31									
TOTAL		WEEKDAYS							
		SATURDAY/SUNDAY/HOLIDAY							
I HEREBY CERTIFY that the above entries are true and correct report of the hours of work performed, record of which was made daily from the time of arrival and departure to/from the Office.									
<div>Employee's Signature</div> <div>Immediate Supervisor</div>									

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