

ACCOUNTING TIME SHEET

Client Site:
Manager Name:

Asian Agri
Yoke Boon

Employee Name:
Employee Number:
Month From:

Eirk Naingolan Yohanes
INCONJUK086
1-Sep-19

To: 30-Sep-19

DATE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Work Hrs		8	8	8	8	8	4		8	8	8	8	8	4		8	8	8	8	8	4		8	8	8	8	4		8	
OT Hrs																														
H-Holiday																														
AL-Annual Leave																														
S-Sick Leave																														
U-Unpaid Leave																														
C-Comp Off																														
W-Sat & Sun	W							W							W							W							W	
Total																														

Pls write the corresponding alphabets (L for annual leave, S for sick leave, C for Comp off.....) against the appropriate date.

Please write the corresponding alphabets (L for annual leave, S for sick leave, C for Comp off.....) against the appropriate date.

Total No. of Days Worked:

25

Total No. of Billable OT Hrs/Days:

30

I CERTIFY THAT THE ABOVE IS A TRUE RECORD OF MY TIME FOR THIS PERIOD.

Employee Signature

Date

October 01, 2019

Supervisor Signature

Date

01/10/19

Please Email This Form, Duly Signed To:

Attn: The HR Department

Notes:

** Leave Applications must be faxed with the Timesheets!