



Republic of the Philippines  
**Tourism Infrastructure & Enterprise Zone Authority**

**TIME RECORD**  
**(For Officers Only)**

I hereby certify that I have rendered services regularly for the month of **JULY** **2021** except on the following dates indicated:

**CHARGEABLE AGAINST**

DATE	SICK LEAVE	VACATION LEAVE

  
**0007 ATTY. MARIA TERESA C. ALVAREZ**  
Manager, Operations Department  
Designation

NOTED:

**JETRO NICOLAS F. LOZADA**  
ACOO, ASSETS MANAGEMENT SECTOR

This form should be submitted within three (3) days of the succeeding month.  
cc: Department File  
Employee