

## **On-Duty Form**

Name		Depar	Department			Reporting Boss	
Visits							
SN	Date	Client Name	From (in-time)	To (out-time)	Purpose	Approval Signature	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
Final Confirmation By:							
		Vertical Head	Vertical Head		Country Head	Country Head	