DAILY TIME RECORD

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Arwin Madera Tolentino

(NAME)

For the month of	December	19-19,	2013

Official hours for arrival { Regular days and departure { Saturdays

DAY ARRIVAL ARRIVAL						-	
ARRIVAL DEPARTU RE HOURS MINUTES 1	DAY			P.M.			
2 3 4 5 5 6 6 7 7 8 8 9 9 10 10 11 1 1 12 12 13 14 15 16 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	DAI	ARRIVAL	DEPARTU RE	ARRIVAL	DEPARTU RE		
3 4 5 5 6 6 7 7 8 8 9 9 10 10 11 1 12 13 14 15 15 16 16 17 18 18 19 19 20 21 12 22 23 24 25 26 27 28 29 30 1 30 1 5 5 6 6 7 7 7 8 7 7 8 7 8 7 8 7 8 7 8 7 8 7	1						
4	2						
5 6 7 8 9 10 10 11 1 12 13 14 15 16 16 17 18 18 19 19 20 21 12 22 23 24 25 26 27 28 29 30 1 30 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1	3						
6	4						
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	5						
8 9 10 11 11 12 13 14 15 16 17 18 19 19 20 21 21 22 23 24 25 26 27 28 29 30	6						
9	7						
10	8						
11 12 13 14 15 16 17 18 19 19 20 11 21 122 23 12 24 12 25 12 26 12 27 12 28 12 30 10	9						
12	10						
13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	11						
14 15 16 17 18 19 20 19 21 19 22 10 23 10 24 10 25 10 26 10 27 10 28 10 30 10	12						
15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	13						
16	14						
17 18 19 20 21 21 22 23 24 25 26 27 28 29 30	15						
18 19 20 21 22 23 24 25 26 27 28 29 30	16						
19	17						
20	18						
21	19						
22	20						
23	21						
24	22						
25 26 27 28 29 30	23						
26	24						
27 28 29 30	25						
28 29 30	26						
29 30	27						
30	28						
	29						
31	30						

I CERTIFY on my honor that the above is a true and correct report of the hours of work performed, record of which was made daily at the time of arrival and departure from office.

VERIFIED as to the prescribed office hours.

TOTAL:

CIVIL SERVICE FORM NO. 48

DAILY TIME RECORD

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Arwin Madera Tolentino

(NAME)

For the month of December 19-19, 2013

Official hours for arrival { Regular days and departure { Saturdays

DAY	A.M.		P.M.		UNDER TIME	
	ARRIVAL	DEPARTU RE	ARRIVAL	DEPARTU RE	HOURS	MINUTES
1						
2						
3						
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27						
28						
29						
30						
31						

I CERTIFY on my honor that the above is a true and correct report of the hours of work performed, record of which was made daily at the time of arrival and departure from office.

VERIFIED as to the prescribed office hours.

TOTAL:

In Charge

(SEE INSTRUCTION ON BACK)

Tardiness: (0x)

Under time: (0x)

The system allow the 40 hrs a week

1st week:

2nd week:

3rd week:

4th week:

In Charge

(SEE INSTRUCTION ON BACK)

Tardiness: (0x)

Under time: (0x)

The system allow the 40 hrs a week

1st week:

2nd week:

3rd week:

4th week: